Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Page 1 of 60 Document

| Fill in this information to identify your ca | se: | |
|--|--|------------------------------------|
| United States Bankruptcy Court for the: | | |
| Case number (# known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

Official Form 101

Identify Yourself

Part 1:

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number

| | | About Debtor 1: | About Debtor 2 (Spanish Call) |
|-------|---|---|---|
| 1. | Your full name | | About Debtor 2 (Spouse Only in a Joint Case): |
| : | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture | MISAEL First name Middle name Espitia | First name Middle name |
| | identification to your meeting with the trustee. | Last name 0 | Last name |
| PENNS | | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| | All other names you have used in the last 8 years | M 15 acL First name | First name |
| | Include your married or maiden names. | Middle name Esaitis | Middle name |
| | | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |

(ITIN)

3. Only the last 4 digits of

your Social Security number or federal Individual Taxpayer Identification number xxx - xx - 3 2 -2 2

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 2 of 60

| Debtor 1 MSCR Mid | die Name Las Name | Case number (# known) |
|--|---|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Any business names and Employer Identification Numbers | l have not used any business names or EINs. | ☐ I have not used any business names or EINs. |
| (EiN) you have used in the last 8 years Include trade names and doing business as names | 1. EXPRESS TECHNOLOGIES INC Business name 2. EXPRESS ELECTRIC INC Business name | Business name |
| | 1. 38-3859701 | Business name EIN |
| _ | 2. 72-1581932 RECTRIC EIN 33-1214855 | EIN — — — — — — — — — — — — — — — — — — — |
| 5. Where you live | 225 No. 10 Acc | If Debtor 2 lives at a different address: |
| | Number Street Augar Aug | Number Street |
| | Milledgeville II (0105) State ZIP Code | City State ZIP Code |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | P.O. Box City State ZIP Code | P.O. Box City State ZIP Code |
| Why you are choosing this district to file for | Check one: | Check one: |
| bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. § 1408.) Decause we live in County now. | I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | over 2hrs away. | |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 3 of 60

| | die Name | Last | Nems | Case number | 3f (if known) |
|---|---|---|---|---|--|
| Part 2: Tell the Court A | bout You | ır Bank | ruptcy Case | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | V | ck one. (F ankruptc Chapter | | Notice Required by of page 1 and chec | / 11 U.S.C. § 342(b) for Individuals Filing ck the appropriate box. |
| | | hapter | | | |
| | | hapter 1 | | | |
| | | hapter 1 | | | |
| 8. How you will pay the fee | loo yo su wir ☐ In Ap ☐ Ire By les pay | purself, y bmitting th a pre- eed to pplication equest t law, a ju s than 1 t the fee | you may pay with cash, cashie by your payment on your behalf printed address. pay the fee in installments. It is not required that my fee be waived (You need may, but is not required to 150% of the official poverty lines in installments). If you shoose in installments). If you shoose | r's check, or mone your attorney may f you choose this or ing Fee in Installm hay request this open, waive your fee, that applies to you this ortion. | ey order. If your attorney is by pay with a credit card or check option, sign and attach the nents (Official Form 103A), option only if you are filing for Chapter, and may do so only if your income is our family size and you are unable to |
| 9. Have you filed for bankruptcy within the | X No | District | (-11014) | m 1005) and me i | t with your petition. |
| | <u> </u> | District | | | |
| last 8 years? | | | | MM / DD / YYYY | Case number |
| rast o years? | | District | ··· | MM / DD / YYYY | |
| rast o years? | | District District | | MM / DD / YYYY MM / DD / YYYY | |
| rasi o years r | | | ··· | MM / DD / YYYY MM / DD / YYYY | Case number |
| Are any bankruptcy | ØkNo | | | MM / DD / YYYY m MM / DD / YYYY | Case number |
| Are any bankruptcy cases pending or being filed by a spouse who is | ØKN0 | District | Whe | MM / DD / YYYY | Case number |
| Are any bankruptcy | ØKN0 | District | Whe | MM / DD / YYYY | Case number |
| Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an | Ø√No □ Yes. | District Debtor District | When When When | MM / DD / YYYY | Case number Case number Relationship to you Case number, if known |
| Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an | ØKNo O Yes. | Debtor District Debtor | Whe | MM / DD / YYYY | Case number Case number Relationship to you Case number, if known |
| Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an | ØKNo O Yes. | Debtor District Debtor | When When When | MM / DD / YYYY | Case number Case number Relationship to you Case number, if known Relationship to you Case number, if known |
| Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ØNo. ØYes. | Debtor District Debtor District District Go to line Has your | When When when when when when when when when w | MM / DD / YYYY | Case number Case number Relationship to you Case number, if known Relationship to you Case number, if known |
| Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an | No. | Debtor District Debtor District District Ago to limited that your residence | When When When When When When When When When When When Plandlord obtained an eviction judge Plandlord obtained an eviction judge Of to line 12. | MM / DD / YYYY | Case number Case number Relationship to you Case number, if known Relationship to you Case number, if known |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 4 of 60

| ebtor 1 MIS(e) First Name Middle | Name | Espitia | Case number (if known) |
|--|---------------------|--|--|
| art St. Report About Any | / Busine | esses You Own as a | Solo Proprietos |
| . Are you a sole proprieto | | | Sole Proprietor |
| of any full- or part-time | | o. Go to Part 4. | |
| business? A sole proprietorship is a | ∟ Ye | es. Name and location o | f business |
| business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or | | Name of business, if an | у |
| LLC. If you have more than one | | Number Street | |
| sole proprietorship, use a separate sheet and attach it | | | |
| to this petition. | | City | State ZIP Code |
| | | | 3340 |
| | | | e box to describe your business: |
| | | ☐ Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) |
| | | ☐ Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | efined in 11 U.S.C. § 101(53A)) |
| | | | r (as defined in 11 U.S.C. § 101(6)) |
| | | None of the above | |
| Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see | most re any of t | cent balance sheet, sta hese documents do not I am not filing under Cl | |
| 11 U.S.C. § 101(51D). | ₩ 190. | the Bankruptcy Code. | er 11, but I am NOT a small business debtor according to the definition in |
| | Yes. | I am filing under Chapt Bankruptcy Code. | er 11 and I am a small business debtor according to the definition in the |
| t 4: Report if You Own o | r Have | Any Hazardous Pro | perty or Any Property That Needs Immediate Attention |
| Do you own or have any | ./ | | The record influential extrention |
| property that poses or is | No. | | |
| alleged to pose a threat of imminent and | ₩ Yes. | What is the hazard? | |
| dentifiable hazard to | | | |
| ublic health or safety? Or do you own any | | | |
| roperty that needs mmediate attention? | | If immediate attention i | S needed, why is it posted? |
| or example, do vou own | | | s needed, why is it needed? |
| | | | |
| erishable goods, or livestock nat must be fed, or a building nat needs urgent repairs? | | | |
| at must be fed, or a building | | Where is the property? | |
| at must be fed, or a building | | Where is the property? | Number Street |
| at must be fed, or a building | | Where is the property? | Number Street |
| at must be fed, or a building | | Where is the property? | Number Street City State To 2 |

| MISCIP | | Espitia | |
|------------|-------------|-----------|--|
| rinst Name | Middle Name | Last Name | |

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| Α | bou | ıt 🛭 |)et | stoi | 1. |
|---|-----|------|-----|------|----|
| | | | | | |

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| _ | ı | am | not | require | d to | receive | a | briefing | about |
|---|---|------|-------|---------|------|---------|----|----------|-------|
| | • | cred | it co | unselir | ıg b | ecause | of | : | |

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing | _ |
|---|-------|
| . Fam flot required to receive a briefing | about |
| credit counseling because of: | |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Page 6 of 60 Document

| | | | known) |
|--|--|--|--|
| Part 6: Answer These Ques | stions for Reporting Purpose: | 5 | |
| 16. What kind of debts do you have? | No. Go to line 16b. | permany for a personal, lanny, or no | |
| | 16b. Are your debts primarily money for a business or investing. No. Go to line 16c. Yes. Go to line 17. | r business debts? Business debts street or through the operation of the | s are debts that you incurred to obtain e business or investment. |
| | 16c. State the type of debts you ov | ve that are not consumer debts or bu | siness debts. |
| | No. I am not filing under Chapter 7 administrative expenses a No | ter 7. Go to line 18. 7. Do you estimate that after any exer re paid that funds will be available to | npt property is excluded and distribute to unsecured creditors? |
| you estimate that you [owe? | X 1-49 □ 50-99 □ 100-199 □ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | □ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion |
| Part 7: Sign Below | | | ☐ More than \$50 billion |
| If | I have chosen to file under Chanter | eclare under penalty of perjury that the 7, I am aware that I may proceed, if prestand the relief available under each | |
| I n I u wit 18 | equest relief in accordance with the inderstand making a false statemen th a bankruptcy case can result in figure 10.5, C. §§ 152, 1341, 1519 and 15 | chapter of title 11, United States Cod. t, concealing property, or obtaining more supplied \$250,000, or imprisonment | de, specified in this petition. noney or property by fraud in connection tor up to 20 years, or both. of Debtor 2 |

MM / DD /YYYY

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 7 of 60

| For your attorney, if you are represented by one | I, the attorney for the debtor(s) named in this perfect to proceed under Chapter 7, 11, 12, or 13 of the available under each chapter for which the perfect that the perfect tha | room in official and states Code, a | nd have explained the relief | | | |
|---|--|--|------------------------------|--|--|--|
| If you are not represented by an attorney, you do not need to file this page. | knowledge after an inquiry that the information | available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. | | | | |
| nood to me this page. | × | Data | | | | |
| | Signature of Attorney for Debtor | Date | MM / DD /YYYY | | | |
| | Firm name Number Street City | State | ZIP Code | | | |
| | Contact phone | Email address | | | | |
| | | | | | | |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 8 of 60

| Debtor 1 4150 e Middle Nam | Esotha Last Name | Case number (if known) |
|--|---|---|
| For you if you are filing this bankruptcy without an attorney If you are represented by | themselves successfully. Bec | dual, to represent yourself in bankruptcy court, but you people find it extremely difficult to represent ause bankruptcy has long-term financial and legal ily urged to hire a qualified attorney. |
| an attorney, you do not need to file this page. | To be successful, you must correct technical, and a mistake or inaction dismissed because you did not file hearing, or cooperate with the coufirm if your case is selected for aud | tly file and handle your bankruptcy case. The rules are very may affect your rights. For example, your case may be a required document, pay a fee on time, attend a meeting or t, case trustee, U.S. trustee, bankruptcy administrator, or audit it. If that happens, you could lose your right to file another including the benefit of the automatic stay. |
| | You must list all your property and court. Even if you plan to pay a par in your schedules. If you do not list property or properly claim it as exer also deny you a discharge of all you case, such as destroying or hiding processes are randomly audited to dete | debts in the schedules that you are required to file with the ticular debt outside of your bankruptcy, you must list that debt a debt, the debt may not be discharged. If you do not list mpt, you may not be able to keep the property. The judge can ur debts if you do something dishonest in your bankruptcy property, falsifying records, or lying. Individual bankruptcy rmine if debtors have been accurate, truthful, and complete. |
| | If you decide to file without an attorn hired an attorney. The court will not successful, you must be familiar with | treat you differently because you are filing for yourself. To be the United States Bankruptcy Code, the Federal Rules of |
| | Are you aware that filing for bankrup consequences? I No Yes | tcy is a serious action with long-term financial and legal |
| | ' | is a serious crime and that if your bankruptcy forms are be fined or imprisoned? |
| | Did you pay or agree to pay someone No Yes. Name of Person | e who is not an attorney to help you fill out your bankruptcy forms? parer's Notice, Declaration, and Signature (Official Form 119). |
| | | understand the risks involved in filing without an attorney. I and I am aware that filing a bankruptcy case without an hts or property if I do not properly handle the case. |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date $\frac{05/0/2014}{MM/DD/YYYY}$ Contact phone $\frac{709-972}{2014}$ | Date MM / DD / YYYY |
| | Cell phone 706 - 972 - 8 | Contact phone Cell phone |
| | Email address | Email address |

Entered 06/06/16 16:05:16 Desc Main Case 16-81372 Doc 1 Filed 06/06/16 Document Page 9 of 60

| Debtor 1 | Misnel | · · · · · · · · · · · · · · · · · · · | Espitia |
|---------------------|--------------------------|---------------------------------------|-------------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the | ne: | District of |
| ^ | | | (State) |
| Case number | 715. | | (0.0.0) |
| | (If known) | | |

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

| be as complete and accurate as possible. If two married people are filing together, both are equally responsible for Information. Fill out all of your schedules first; then complete the information on this form. If you are filing amend Your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. | or supplying correct led schedules after you file |
|--|--|
| Part 1: Summarize Your Assets | |
| . Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | Your assets Value of what you own |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$26,712 |
| 1c. Copy line 63, Total of all property on Schedule A/B | |
| art 2: Summarize Your Liabilities | |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | . \$ |
| | |
| ort 3: Summarize Your Income and Expenses | |
| Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | , |
| | - |

Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Page 10 of 60 Document Debtor 1 **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 8 4,4 16 xx 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main

| or Proper Waterman & | Case 10-01372 | | Document | Page 11 of |
|---------------------------------|---------------------------|--------------|--------------------|------------|
| Fill [®] in this in | formation to identify yo | our case and | this filing: | |
| Debtor 1 | MISGP First Name | Middle Name | Essita Lad Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Sankruptcy Court for the: | | District of | |
| Case number | | | (Sta | te) |
| | | | | |
| Official | Form 106A/B | | | |
| A | | _ | | |

Check if this is an amended filing

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| o you own or have any legal or equitable in No. Go to Part 2. | terest in any residence, building, land, or similar pro | perty? | |
|---|---|---|---|
| Yes. Where is the property? | | | |
| 1.1. Street address, if available, or other descriptio | ☐ Condominium or cooperative ☐ Manufactured or mobile home | Do not deduct secured of the amount of any secure Creditors Who Have Cla Current value of the entire property? | ed claims on Schedule I ims Secured by Propert |
| | — 🔲 Land | \$ | \$ |
| City State ZIP C | Investment property Timeshare Other | Describe the nature interest (such as fee the entireties, or a life | simple, tenancy by |
| | Who has an interest in the property? Check one. Debtor 1 only | | e estate), if known. |
| County | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | Check if this is co | ommunity property |
| | At least one of the debtors and another Other information you wish to add about this it property identification number: | • | |
| ou own or have more than one, list here: 2. Street address, if available, or other description | Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building | • | d claims on Schedule D |
| 2 | Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | Do not deduct secured cla | d claims on Schedule Dans Secured by Property. |
| 2 | Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | Do not deduct secured cla the amount of any secured Creditors Who Have Clain | d claims on Schedule D ns Secured by Property. Current value of th |
| 2 | Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other | Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property? Describe the nature of interest (such as fee secured) | d claims on Schedule D. s Secured by Property. Current value of the portion you own? \$ |
| 2. Street address, if available, or other description | Other information you wish to add about this in property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare | Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property? \$ | d claims on Schedule D. s Secured by Property. Current value of the portion you own? \$ |
| 2. Street address, if available, or other description | Other information you wish to add about this in property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property? Describe the nature of interest (such as fee secured) | d claims on Schedule D as Secured by Property. Current value of the portion you own? \$ |
| 2. Street address, if available, or other description | Other information you wish to add about this in property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property? Describe the nature of interest (such as fee secured) | d claims on Schedule D. s Secured by Property. Current value of th portion you own? \$ |
| Street address, if available, or other description City State ZIP Cod | Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property? Describe the nature of interest (such as fee sthe entireties, or a life | d claims on Schedule D. s Secured by Property. Current value of the portion you own? \$ |
| Street address, if available, or other description City State ZIP Cod | Other information you wish to add about this in property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property? Describe the nature of interest (such as fee secured) | d claims on Schedule Das Secured by Property. Current value of the portion you own? \$ |

| Tymen or delt encode, | en kanalan ang kapangan ang kanalan kanang kanan ang kapang kapang kapang kapang kapang kapang kapang kapang k | | | A STATE OF THE PROPERTY OF THE | |
|--|--|---|---|--|---|
| | | | What is the property? Check all that apply. | Do not deduct secured | d claims or exemptions. Put |
| 1. | 3. Street address if avail | ilable, or other description | Single-family home | the amount of any sec | ured claims on Schedule D Claims Secured by Property |
| | | idule, or other description | Duplex or multi-unit building Condominium or cooperative | and the second content and method to the second sec | ne Current value of the |
| | **** | | Manufactured or mobile home | entire property? | portion you own? |
| | | | Land | \$ | \$ |
| | City | | Investment property | _ | |
| | Ony | State ZIP Code | - Iniconare | Describe the natur interest (such as fe | e of your ownership |
| | | | | the entireties, or a | life estate), if known. |
| | | | Who has an interest in the property? Check one | 3 . | |
| | County | 1170-1 | Debtor 1 only | | |
| | | | Debtor 2 only Debtor 1 and Debtor 2 only | | |
| | | | At least one of the debtors and another | (see instructions) | community property |
| | | | Other information you wish to add about this i property identification number: | item, such as local | |
| Add vou | the dollar value of the | e portion you own for | all of your entries from Part 1, including any entri | es for pages | |
| , | mare attached for Pal | rt 1. write that number | here. | ······ | \$ |
| you (| own, lease, or have le | egal or equitable intere | st in any vehicles, whether they are registered or le, also report it on Schedule G: Executory Contracts | not? Include any vehicle and Unexpired Leases. | es |
| you own | own, lease, or have le that someone else driv , vans, trucks, tractor | egal or equitable intere | e, also report it on Schedule G: Executory Contracts | not? Include any vehicle and Unexpired Leases. | es |
| Cars, | own, lease, or have le that someone else driv , vans, trucks, tractor | egal or equitable intere | e, also report it on Schedule G: Executory Contracts | not? Include any vehicle and Unexpired Leases. | es |
| you own | own, lease, or have le that someone else driv , vans, trucks, tractor | egal or equitable intere ves. If you lease a vehic s, sport utility vehicles | e, also report it on <i>Schedule G: Executory Contracts</i> | and Unexpired Leases. | Na alakah karabah katan katan kana kana kana kana kana ka |
| you own | own, lease, or have le that someone else driv , vans, trucks, tractor o es | egal or equitable intere | who has an interest in the property? Check one. | Do not deduct secured clathe amount of any secure | aims or exemptions. Put d claims on <i>Schedule D</i> |
| you own | own, lease, or have le that someone else driv , vans, trucks, tractor o es Make: | egal or equitable intere ves. If you lease a vehic s, sport utility vehicles | e, also report it on <i>Schedule G: Executory Contracts</i> | and Unexpired Leases. | aims or exemptions. Put d claims on <i>Schedule D</i> |
| you own | own, lease, or have le that someone else driv , vans, trucks, tractor o es Make: Model: Year: | egal or equitable intereves. If you lease a vehicles, sport utility vehicles Volkswagen Golf 2016 | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the | aims or exemptions. Put d claims on <i>Schedule D</i> ms Secured by Property. Current value of the |
| you own ars, N | own, lease, or have le that someone else driv , vans, trucks, tractor o es Make: Model: Year: Approximate mileage: | egal or equitable intereves. If you lease a vehicles, sport utility vehicles Volkswagen Golf 2016 | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured class the amount of any secure Creditors Who Have Clair | aims or exemptions. Put d claims on <i>Schedule D</i> ms Secured by Property. |
| you own | own, lease, or have le that someone else driv , vans, trucks, tractor o es Make: Model: Year: | egal or equitable intereves. If you lease a vehicles, sport utility vehicles Volkswagen Golf 2016 20,000 | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the | aims or exemptions. Put d claims on <i>Schedule D</i> ns Secured by Property. Current value of the portion you own? |
| you own | own, lease, or have lead that someone else driven and the someone and the | egal or equitable intereves. If you lease a vehicles, sport utility vehicles Volkswagen Golf 2016 20,000 secured debt, | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? | aims or exemptions. Put d claims on <i>Schedule D</i> ns Secured by Property. Current value of the portion you own? |
| you cown | own, lease, or have lethat someone else drive, vans, trucks, tractor of es Make: Model: Year: Approximate mileage: Other information: | egal or equitable intereves. If you lease a vehicles, sport utility vehicles Volkswagen Golf 2016 20,000 secured debt, | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ | aims or exemptions. Put d claims on Schedule D ms Secured by Property. Current value of the portion you own? |
| you own N Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | own, lease, or have lead that someone else driven and the someone else arises arises and the someone else arises arises arises are someone else arises ari | egal or equitable intereves. If you lease a vehicles, sport utility vehicles Volkswagn Golf 2016 20,000 secured debt, one, describe here: Dodge | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured claime amount of any secure Creditors Who Have Claim Current value of the entire property? \$ | aims or exemptions. Put d claims on Schedule D. ms Secured by Property. Current value of the portion you own? \$ |
| you own Cars, N Y Y Y Y Y Y Y Y Y O Y O Y O Y O Y O Y | own, lease, or have let that someone else drive, vans, trucks, tractor of es. Make: Model: Year: Approximate mileage: Other information: This is a common or have more than Make: Model: | egal or equitable intereves. If you lease a vehicles Solkswagen Golf 2016 20,000 secured debt, one, describe here: Dodge Caravaa | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ | aims or exemptions. Put d claims on Schedule D. ms Secured by Property. Current value of the portion you own? \$ |
| you own Cars, N XI Y | own, lease, or have lead that someone else driven and the someone else are some | egal or equitable intereves. If you lease a vehicles Volkswagen Golf 2016 20,000 secured debt, one, describe here: Dodge Carawan 2007 | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ | aims or exemptions. Put d claims on Schedule D. ms Secured by Property. Current value of the portion you own? \$ |
| you own N Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | own, lease, or have let that someone else drive, vans, trucks, tractor of es. Make: Model: Year: Approximate mileage: Other information: This is a common or have more than Make: Model: | egal or equitable intereves. If you lease a vehicles Solkswagen Golf 2016 20,000 secured debt, one, describe here: Dodge Caravaa | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | Do not deduct secured class. Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ | aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ |

| 3.3. | Make: Model: Year: | Dodge Caravan 2007 | Who has an interest in the property? Check on Debtor 1 only Debtor 2 only | the amount of any secu | claims or exemptions. Put ired claims on Schedule D aims Secured by Property. |
|------------|---|--------------------------|--|--|--|
| | Approximate mileage: Other information: | | Debtor 1 and Debtor 2 onlyAt least one of the debtors and another | Current value of the entire property? | Current value of the portion you own? |
| | | | ☐ Check if this is community property (see instructions) | \$ 1,200 | \$ 1,200 |
| 3.4. | Make: Model: | Chevy 630 Van | Who has an interest in the property? Check one Debtor 1 only | the amount of any secure | laims or exemptions. Put ed claims on <i>Schedule D</i> : |
| | Year: | 1989 | Debtor 2 only | Creditors Who Have Cla | ims Secured by Property. |
| | Approximate mileage: Other information: | 280,000 | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Current value of the entire property? | Current value of the portion you own? |
| | | | ☐ Check if this is community property (see instructions) | \$ 200 | \$ <u>200</u> |
| No. 1. |) | omes, ATVs and o | ther recreational vehicles, other vehicles, and accessorant, fishing vessels, snowmobiles, motorcycle accessorant. Who has an interest in the property? Check one. | Do not deduct secured claithe amount of any secured | claims on Schedule O. |
| No. | Make: | omes, ATVs and o | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured claim the amount of any secured Creditors Who Have Claim | d claims on Schedule D: as Secured by Property. |
| No. | Make: Model: Year: | omes, ATVs and o | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do not deduct secured claithe amount of any secured | d claims on Schedule D: as Secured by Property. |
| No. | Make: Model: Year: | omes, ATVs and o | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured claim the amount of any secured Creditors Who Have Claim | I claims on Schedule D: as Secured by Property. Current value of the |
| No. | Make: Model: Year: Other information: | iors, personal water | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured claim the amount of any secured Creditors Who Have Claim | claims on Schedule Dissipports Secured by Property. Current value of the |
| Ye | Make: Model: Year: Other information: wwn or have more than o | ne, list here: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured. | claims on Schedule D: Is Secured by Property. Current value of the portion you own? \$ |
| No 1 Ye | Make: Model: Year: Other information: When or have more than of the control of | ne, list here: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured (Creditors Who Have Claims) | claims on Schedule D: Is Secured by Property. Current value of the portion you own? \$ |
| No 1 Ye | Make: Model: Year: Other information: wwn or have more than o | ne, list here: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ | claims on Schedule D: Is Secured by Property. Current value of the portion you own? \$ |
| No 1 Ye | Make: Model: Year: Other information: When or have more than of the control of | ne, list here: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only | Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ | claims on Schedule D: Is Secured by Property. Current value of the portion you own? \$ |

5.

| Part 3: Describe | Your | Personal | and | Household | item |
|------------------|------|----------|-----|-----------|------|
|------------------|------|----------|-----|-----------|------|

| Examples: Najor appliances, furniture, linens, china, kitchenware No | DO YOU OWN OF HAVE AN | y legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claim |
|---|--|--|--|
| Examples: Major appliances, furniture, linens, china, kitchenware No No ST | 6. Household goods a | nd furnishings | or exemptions. |
| No See Describe | F | | |
| Collectibles of value Small TV2 D D Ayd D Collectibles S S S S S S S S S | ☐ No | (970) (95) 425 | |
| Collectibles of value Small TV2 D D Ayd D Collectibles S S S S S S S S S | Yes. Describe | Couches (3), various chairs, daily used Kitchware for | ************************************** |
| Collectibles of value Small TV2 D D Ayd D Collectibles S S S S S S S S S | 1 | cooking leating with a everything used not | \$ 100 |
| Collectibles of value Small TV2 D D Ayd D Collectibles S S S S S S S S S | 7. Electronics | Bought new | |
| No Yes. Describe. Small Ty (D player, prinker) prinker) prinkers prinkers | collections | s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ; electronic devices including cell phones, cameras, media players, games | |
| 8. Collectibles of value Examples: Antiques and figurines: paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No | U No ⊠ Voc Doposibo | 15mall = (50) (10 01448 (50) | |
| Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, colin, or baseball card collections, other collections, memorabilia, collectibles No | 1 | | \$ 130 |
| Sequipment for sports and hobbies Sequipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No | A Company of the Comp | | ٥ |
| Yes. Describe | Junip, Con | nd figurines; paintings, prints, or other artwork; books, pictures, or other art objects; n, or baseball card collections; other collections, memorabilia, collectibles | |
| 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No | | | · |
| Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe | | | \$ |
| No Yes. Describe | 9. Equipment for sports | and hobbies |] |
| Yes. Describe | najano | , corporary tools, musical institutions | |
| Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe | □ No | | |
| Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe | Yes. Describe | 2040 1040 2015-102. 1. /ai | s 180 — |
| Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe | 10. Firearms | 15. 6. 1885 (Skill Saw, shorels (*xc?) | |
| No Yes. Describe | | | |
| 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe | M No | r, shougans, animulation, and related equipment | |
| 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe | Yes. Describe | | |
| Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No | 11 Clothan | | \$ |
| Yes. Describe | | | |
| Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe | □ No | thes, turs, leather coats, designer wear, shoes, accessories | |
| Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe | Yes, Describe | Every day clothes gun shoes work boots | |
| Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe | / | Kids Cibling & Shops Loo (8) | \$ <u>200</u> |
| Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe | | The state of the s | |
| No Yes. Describe | 12. Jeweiry | | |
| Yes. Describe | ∀ | elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | |
| S. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe | / == | | |
| Examples: Dogs, cats, birds, horses No Yes. Describe | | | \$ |
| No Yes. Describe Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information | | | |
| Yes. Describe 4. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information | | rds, horses | |
| 4. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information | | | |
| A.Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information | | | \$ |
| Yes. Give specific information | 14. Any other personal and | household items you did not already list, including any health aids you did not list | *************************************** |
| information | ⊠ No | | |
| 6. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached | | | |
| 6. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached | information | | \$ |
| for Part 3. Write that number here \$ 5/0 | 5. Add the dollar value of | all of your entries from Part 3, including any entries for pages you have attacked. | |
| | for Part 3. Write that nu | mber here | <u> 5/0 —</u> |

| 1 | De | 'n | 'nε | 1 |
|---|----|----|-----|---|

| Case 16-81372 | Doc 1 , Filed 06/06/16 | Entered 06/06/16 16:05:16 | Desc Main |
|------------------------|------------------------|---------------------------------|-----------|
| First Name Middle Name | Last Name Document | Page 15 of 60 number (if known) | |

| uo you own or have any | / legal or equitable interest in | nany of the following? | Current value of the portion you own? Do not deduct secured claim or exemptions. |
|--|--|--|--|
| | have in your wallet, in your ho | me, in a safe deposit box, and on hand when you file your petition | |
| X No | | | |
| ☐ Yes | | Cash: | \$ |
| 7. Deposits of money Examples: Checking, s and other s | savings, or other financial acco imilar institutions. If you have n | unts; certificates of deposit; shares in credit unions, brokerage houses, nultiple accounts with the same institution, list each. | |
| Yes | | Institution name: | |
| | 17.1. Checking account: | Fifth Third Bank | s 300 - |
| | 17.2. Checking account: | Fifth Third Bank | s 50 - |
| | 17.3. Savings account: | Fifth Third Bank | s 46- |
| | 17.4. Savings account: | | \$ |
| | 17.5. Certificates of deposit: | | \$ |
| | 17.6. Other financial account: | | ę |
| | 17.7. Other financial account: | | \$ |
| | 17.8. Other financial account: | | |
| | 17.9. Other financial account: | | \$ |
| Examples: Bond funds, | or publicly traded stocks investment accounts with broke | erage firms, money market accounts | * |
| ☑ Yes | Institution or issuer name: | | |
| | | | |
| | | | \$ |
| | | | \$ |
| | | | Φ |
| Non-publicly traded sto an LLC, partnership, a | ock and interests in incorpor | ated and unincorporated businesses, including an interest in | |
| Ø No | Name of entity: | % of ownership: | |
| | | · · · · · · · · · · · · · · · · · · · | |

| Debtor 1 Case 16-81372 Doc 1 Filed | d 06/06/16 Entered 06/06/16 16:05:16 Des cument Page 17 of 6 number (if known) | sc Main |
|--|--|--|
| S. State Control of the Control of t | | |
| 24. Interests in an education IRA, in an account in a quality 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | ified ABLE program, or under a qualified state tuition program. | en e |
| ⊠ No | | |
| Yes Institution name and description | cription. Separately file the records of any interests.11 U.S.C. § 521(o | Α. |
| | or any interests. IT 0.5.0. § 521(0 | 3) : |
| | | \$ |
| | | \$ |
| *************************************** | | \$ |
| 25. Trusts, equitable or future interests in property (other exercisable for your benefit | than anything listed in line 1), and rights or powers | |
| X No | | |
| Yes. Give specific | | 7 |
| information about them | | \$ |
| The same of the sa | | |
| 26. Patents, copyrights, trademarks, trade secrets, and other | ther intellectual property | |
| Examples: Internet domain names, websites, proceeds from No | om royalties and licensing agreements | |
| Yes. Give specific | | 7 |
| information about them | | \$ |
| 27. Licenses, franchises, and other general intangibles | | j |
| Examples: Building permits, exclusive licenses, cooperative | re association holdings, liquor licenses, professional licenses | |
| □ No | a association flordings, liquol licenses, professional licenses | |
| · · · · · · · · · · · · · · · · · · · | lectrical license (certificate) |) |
| information about them | contag occurre ((ery mare) | s 100 - |
| | | |
| Money or property owed to you? | | Current value of the |
| | | portion you own? Do not deduct secured |
| | | claims or exemptions. |
| 28. Tax refunds owed to you | | |
| Ø No | | : |
| Yes. Give specific information about them, including whether | Federal: \$ | |
| you already filed the returns | i | |
| and the tax years | Local: \$ | - |
| In account of the contract of | The state of the s | |
| 29. Family support | | |
| Examples: Past due or lump sum alimony, spousal support, | child support, maintenance, divorce settlement, property settlement | |
| ₩ No | | |
| Yes. Give specific information | | |
| | Alimony: | \$ |
| | Maintenance; | \$ |
| | Support: | \$ |
| | Divorce settlement: | \$ |
| Of Other amounts assured | Property settlement: | \$ |
| 80. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, dis | sability benefits, sick pay, vacation pay, workers' compensation, | |
| occar decurry beliefits, dripaid loans you made | to someone else | |
| No No | | <u> </u> |
| Yes. Give specific information | | |
| | | \$: |

| Debtor 1 | Case 16-81372 Do | c 1 Filed 06/06/16 | Entered 06/06/16 16:05:16 D Page 18 of 6 number (# known) | |
|--------------------------------|---|--|--|--|
| | s in insurance policies s: Health, disability, or life insuran | ce; health savings account (H | SA); credit, homeowner's, or renter's insurance | |
| ' □ Yes. 1 | Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| | | | | \$ \$ |
| If you are | rest in property that is due you the beneficiary of a living trust, expecause someone has died. | from someone who has died spect proceeds from a life inst | d urance policy, or are currently entitled to receive | <u> </u> |
| Yes. C | Give specific information | | | \$ |
| Examples. | : Accidents, employment disputes | not you have filed a lawsuit , insurance claims, or rights to | or made a demand for payment o sue | |
| Yes. D | Describe each claim | | | s |
| 34. Other con to set off | tingent and unliquidated claims claims | s of every nature, including | counterclaims of the debtor and rights | , s |
| ☐ Yes. D | escribe each claim | | | \$ |
| 35. Any financ | cial assets you did not already l | ist | | |
| · <u> </u> | ive specific information | | | \$ |
| 36. Add the do | ollar value of all of your entries Write that number here | from Part 4, including any e | entries for pages you have attached | ,24,302 |
| Part 5: D | escribe Any Business-Ro | elated Property You 0 | wn or Have an Interest In. List any : | real estate in Part 1 |
| 37. Do you ow No. Go | n or have any legal or equitable to Part 6. | | | out estate in Fait 1. |
| Yes. Go | o to line 38. | | | SA GOOMARIEGEN GESTERLA |
| | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. Accounts r o | eceivable or commissions you | already earned | | |
| [′] □ Yes. De | escribe | 4 | | \$ |
| 9. Office equi | pment, furnishings, and supplied | 95 | hines, rugs, telephones, desks, chairs, electronic devices |) |
| Ø No | | copiers, panters, copiers, tax mac | nines, rugs, telephones, desks, chairs, electronic devices | ··· |
| ₩ Yes. De | scribe | | | \$ |

| Debtor 1 Case | 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16 | 6:05:16 E | Desc Main |
|---|---|---|--|
| 40 Machinery fivtures | 2 COulomont annullation | | |
| Ø No | s, equipment, supplies you use in business, and tools of your trade | | |
| Yes. Describe | | Walter 1997 | |
| | | | \$ |
| | | | |
| 1.Inventory No | | | |
| Yes. Describe | | The second secon | |
| | | | \$ |
| 2.Interests in partner | ships or joint ventures | And the second s | The terminal |
| No No | sups or joint ventures | | |
| Yes. Describe | m. Name of all O | | |
| | | % of ownership: | |
| | | % | \$ |
| | | % | \$ |
| | | % | \$ |
| L)XI-No | ling lists, or other compilations | | |
| Yes. Do your list | ts include personally identifiable information (as defined in 11 U.S.C. § 101(41A)) | ? | |
| □ No | | - | |
| Yes. Des | scribe | $24.64^{\circ} \times 10^{-10} \times 10^{-10}$ | P/ID Alterna |
| | | | \$ |
| Any business-related | d property you did not already list | | |
| No. | | | |
| Yes. Give specific information | ; | | |
| anonnadon | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| Add the dollar value | of all of your entries from Part 5, including any entries for pages you have attact | _ | 7 |
| or Part 5. Write that | number here | hed | \$ |
| territoria de la companya de la comp | | *************************************** | |
| | | • • | |
| 6: Describe A If you own or | ny Farm- and Commercial Fishing-Related Property You Own or Have r have an interest in farmland, list it in Part 1. | an interest i | n. |
| o you own or have a | ny legal or equitable interest in any farm- or commercial fishing-related property | v? | |
| No. Go to Part /. | g | • | |
| Yes. Go to line 47. | | | |
| | | | Current value of the |
| | | | portion you own? |
| arm animals | | | Do not deduct secured claims or exemptions. |
| | oultry, farm-raised fish | | |
| ≨ _{No} | S. Surges Hell | | |
|] Yes | | | -13 |
| | | | - Name of the state of the stat |
| | | | \$ |
| | | | |

| Debtor 1 | Case 16-81372 | Doc 1 Filed 06/ | 06/16 Entered ent Page 20 (| 06/06/16 16:05:16 D | esc Main |
|---------------------------|---|---|--|--|------------------|
| <u>.</u> | | | | | |
| ⊹ 48. Crops—e ∃ | ither growing or harveste | | | | |
| Yes. (| Give specific | Тори айышта кашанатын атторуунун ай-айдайлайы кака ашышаш такадауы уулуу адаа үүлүй | | | |
| 1 | L | ements, machinery, fixture | | | \$ |
| , Ş X No | | | | | |
| Yes | | | | | \$ |
| 50. Farm and | fishing supplies, chemic | als. and feed | | | |
| Q No | | | | | |
| Yes | *************************************** | | | | |
| | 11. | | | ONE OF THE RESEARCH AND ADMINISTRATION OF THE SECOND SECON | \$ |
| БЖNо | | related property you did n | - | | į |
| | Bive specific ation | | | | \$ |
| 52. Add the d | ollar value of all of your | entries from Part 6, includi | | A second and a second s | |
| for Part 6. | Write that number here | *************************************** | | → | \$ |
| Yes. G informa | ive specific ation | | | | \$\$ \$\$ |
| 54. Add the de | mar value of all of your e | ntries from Part 7. Write th | at number here | • | <u> </u> |
| Part 8: L | ist the Totals of Ea | ch Part of this Form | enderstanding to the second of | er en | · |
| 55. Part 1: Tot | al real estate, line 2 | | | → | s |
| 56. Part 2: Tota | al vehicles, line 5 | | \$ 1,900 | _ | |
| 57. Part 3: Tota | al personal and househo | id items, line 15 | \$ 5/0 | ••• | · · |
| 58. Part 4: Tota | al financial assets, line 36 | 3 | \$24,30Q | | |
| | al business-related prope | | \$ | | to the demonstra |
| 60. Part 6: Tota | al farm- and fishing-relate | d property, line 52 | \$ <u>Ø</u> | _ | |
| 61. Part 7: Tota | al other property not liste | d, line 54 | +\$ | | |
| 62. Total perso | onal property. Add lines 56 | through 61 | \$26,712 | Copy personal property total 👈 | +526,712 |
| 63. Total of all | property on Schedule A/I | 3. Add line 55 + line 62 | | ······································ | \$ 26,712 |

| Assessment Commencer Section | | | | | |
|--|--|--|--|--|------------------------------------|
| Fill in this @nfo | rmation to identify y | your case: | Document | Page 21 of 60 | |
| Debtor 1 | Misael | | Espitia | | |
| Fi | rst Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) Fi | rst Name | Middle Name | Last Name | | |
| United States Ban | kruptcy Court for the: | | District o | f | |
| Case number | | | District | (State) | _ |
| (If known) | | | | | ☐ Check if the amended f |
| | | | | | |
| Official Fo | rm 106C | | | | |
| chedu | le C: The | Prope | ertv You | Claim as Exem | nt |
| | | | | | |
| ace is needed, f | | his page as man | | ogether, both are equally responsible SAB) as your source, list the property Additional Page as necessary. On the | |
| | oo nambar (ii kriowii) |). | | | |
| `each item of _! ecific dollar an | property you claim a | as exempt, you | must specify the | amount of the exemption you claim | n. One way of doing so is to state |
| any applicable | statutory limit. Som | ne exemptions | -Such as those fo | is fair market value of the property | being exempted up to the amount |
| | oc amminited i | III UUHAL AIHDUN | II. MOWAVAF ITVAL | Ciaim an overmelies af 4000 - cc : | |
| | ion to a particular de to the applicable sta | ivnar amount an | iu ine value of the | property is determined to exceed | that amount, your exemption |
| | o the applicable 2fa | stutory amount. | | | |
| art 1: Iden | tify the Property | You Claim as | Exempt | | |
| | | | - | | |
| | | | | | |
| Which set of | exemptions are you | claiming? Chec | ck one only, even i | f your spouse is filing with you. | - |
| | aiming state and fede | eral nonbankrupt | cv exemptions 11 | f your spouse is filing with you. U.S.C. § 522(b)(3) | · |
| You are cl | exemptions are you aiming state and fede aiming federal exemp | eral nonbankrupt | cv exemptions 11 | f your spouse is filing with you. U.S.C. § 522(b)(3) | <u>.</u> |
| You are cl | aiming state and fede aiming federal exemp | eral nonbankrupti ptions. 11 U.S.C. | cy exemptions. 11 . § 522(b)(2) | U.S.C. § 522(b)(3) | • |
| You are cl | aiming state and fede aiming federal exemp | eral nonbankrupti ptions. 11 U.S.C. | cy exemptions. 11 . § 522(b)(2) | f your spouse is filing with you. U.S.C. § 522(b)(3) pt, fill in the information below. | <u>.</u> |
| You are cl | aiming state and fede aiming federal exemp | eral nonbankrupt ptions. 11 U.S.C. edule A/B that yound line on Cur | cy exemptions. 11 . § 522(b)(2) | U.S.C. § 522(b)(3) | n Specific laws that allow exemp |
| You are cl | aiming state and federal exemperty you list on Sche | eral nonbankrupti ptions. 11 U.S.C. edule A/B that you and line on Cur rty port | ccy exemptions. 11 . § 522(b)(2) ou claim as exem | U.S.C. § 522(b)(3) pt, fill in the information below. | |
| You are cl. You are cl. For any prope Brief descript Schedule A/B | aiming state and federal exemperty you list on Sche | eral nonbankrupti ptions. 11 U.S.C. edule A/B that you and line on Cur rty port | cy exemptions. 11 . § 522(b)(2) ou claim as exem rent value of the tion you own by the value from edule A/B | U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption | |
| You are cl. You are cl. For any prope Brief descript Schedule A/B Brief description: Line from | aiming state and federal exemperty you list on Sche | eral nonbankrupti ptions. 11 U.S.C. edule A/B that you and line on Cur rty port | cy exemptions. 11 . § 522(b)(2) ou claim as exem rent value of the tion you own by the value from | U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption \$\frac{25000}{25000}\$ | on. |
| You are cl. You are cl. For any prope Brief descript Schedule A/B Brief description: Line from | aiming state and federal exemperty you list on Sche | eral nonbankrupti ptions. 11 U.S.C. edule A/B that you and line on Cur rty port | cy exemptions. 11 . § 522(b)(2) ou claim as exem rent value of the tion you own by the value from edule A/B | U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption | on. |
| For any prope Brief description: Line from Schedule A/B: Brief | aiming state and federal exemperty you list on Sche | eral nonbankrupti ptions. 11 U.S.C. edule A/B that you and line on Cur rty port | tcy exemptions. 11 . § 522(b)(2) ou claim as exem rent value of the tion you own by the value from redule A/B | U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption \$\frac{2500}{100\%}\$ 100\% of fair market value, up to | on. |
| You are cl. You are cl. For any prope Brief description: Line from Schedule A/B: Brief description: | aiming state and federal exemperty you list on Sche | eral nonbankrupti ptions. 11 U.S.C. edule A/B that you and line on Cur rty port | cy exemptions. 11 . § 522(b)(2) ou claim as exem rent value of the tion you own by the value from edule A/B | U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption \$\frac{2500}{100\%} \text{00000}\$ | on. |
| You are cl. You are cl. For any prope Brief descript Schedule A/B Brief description: Line from Schedule A/B: Brief description: Line from Line from Line from Line from Line from | aiming state and federal exemperty you list on Sche | eral nonbankrupti ptions. 11 U.S.C. edule A/B that you and line on Cur rty port | tcy exemptions. 11 . § 522(b)(2) ou claim as exem rent value of the tion you own by the value from redule A/B | U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption \$\frac{2500}{100\%}\$ of fair market value, up to any applicable statutory limit \$\frac{100000}{100\%}\$ 100\% of fair market value, up to | on. |
| You are cl. You are cl. For any prope Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: | aiming state and federal exemperty you list on Sche | eral nonbankrupti ptions. 11 U.S.C. edule A/B that you and line on Cur rty port | tcy exemptions. 11 . § 522(b)(2) ou claim as exem rent value of the tion you own by the value from redule A/B | U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption \$\frac{2500}{100\%} \text{00000}\$ | on. |
| You are cl. You are cl. For any prope Brief description: Line from Schedule A/B: Brief description: Line from Line from Line from Line from Line from Line from | aiming state and federal exemperty you list on Sche | eral nonbankrupti ptions. 11 U.S.C. edule A/B that you and line on Cur rty port | tcy exemptions. 11 . § 522(b)(2) ou claim as exem rent value of the tion you own by the value from redule A/B | U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption \$\frac{2500}{100\% \text{off}} = 100\% \text{off} fair market value, up to any applicable statutory limit \$\frac{100000}{100\% \text{off}} = 100\% \text{off} fair market value, up to any applicable statutory limit | on. |
| You are cl. You are cl. For any prope Brief description: Line from Schedule A/B: Brief Line from Line from Line from Line from Line from | aiming state and federal exemperty you list on Sche | eral nonbankrupti ptions. 11 U.S.C. edule A/B that you and line on Cur rty port | tcy exemptions. 11 . § 522(b)(2) ou claim as exem rent value of the tion you own by the value from redule A/B | D.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption 100% of fair market value, up to any applicable statutory limit \$\(\)\$ \(\) \ | on. |
| You are cl. You are cl. For any prope Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Line from Line from Schedule A/B: Brief Line from Line from Line from Line from Line from | aiming state and fede aiming federal exemp erty you list on Sche | eral nonbankrupti ptions. 11 U.S.C. edule A/B that you and line on Cur rty port | tcy exemptions. 11 . § 522(b)(2) ou claim as exem rent value of the tion you own by the value from redule A/B | U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption \$\frac{2500}{100\% \text{off}} = 100\% \text{off} fair market value, up to any applicable statutory limit \$\frac{100000}{100\% \text{off}} = 100\% \text{off} fair market value, up to any applicable statutory limit | on. |
| For any prope Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Are you claiming | aiming state and federal exemplerity you list on Scherity you list on Scherity you list on Scherity and that lists this proper level for the lists this proper | eral nonbankruptions. 11 U.S.C. edule A/B that yound line on Curry Cop Sch | cy exemptions. 11 § 522(b)(2) ou claim as exem rent value of the tion you own by the value from edule A/B 25000 | pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption 100% of fair market value, up to any applicable statutory limit \$ 1000 000 100% of fair market value, up to any applicable statutory limit \$ 000 100% of fair market value, up to any applicable statutory limit | on. |
| For any prope Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Are you claiming (Subject to adju | aiming state and federal exemplerity you list on Scherity you list on Scherity you list on Scherity and that lists this proper level for the lists this proper | eral nonbankruptions. 11 U.S.C. edule A/B that yound line on Curry Cop Sch | cy exemptions. 11 § 522(b)(2) ou claim as exem rent value of the tion you own by the value from edule A/B 25000 | pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption 100% of fair market value, up to any applicable statutory limit \$ 1000 000 100% of fair market value, up to any applicable statutory limit \$ 000 100% of fair market value, up to any applicable statutory limit | on. |
| For any prope Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Are you claiming (Subject to adju | aiming state and federal exemplerity you list on Scherity you list on Scherity you list on Scherity and that lists this proper level for for Jodge Caral 2007 | eral nonbankruptions. 11 U.S.C. edule A/B that yound line on Curry port Cop Schill BE w s_ emption of more and every 3 years and | ou claim as exem rent value of the tion you own by the value from edule A/B 25 000 than \$155,675? after that for cases | pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption \$\frac{2500}{100\% of fair market value, up to any applicable statutory limit \$\frac{10000}{100\% of fair market value, up to any applicable statutory limit \$\frac{10000}{100\% of fair market value, up to any applicable statutory limit \$\frac{1000}{100\% of fair market value, up to any applicable statutory limit | on. |
| For any prope Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Are you claiming (Subject to adju | aiming state and federal exemplerity you list on Scherity you list on Scherity you list on Scherity and that lists this proper level for for Jodge Caral 2007 | eral nonbankruptions. 11 U.S.C. edule A/B that yound line on Curry port Cop Schill BE w s_ emption of more and every 3 years and | ou claim as exem rent value of the tion you own by the value from edule A/B 25 000 than \$155,675? after that for cases | pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption \$\frac{2500}{100\% of fair market value, up to any applicable statutory limit \$\frac{10000}{100\% of fair market value, up to any applicable statutory limit \$\frac{10000}{100\% of fair market value, up to any applicable statutory limit \$\frac{1000}{100\% of fair market value, up to any applicable statutory limit | on. |
| For any prope Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Are you claiming (Subject to adju | aiming state and federal exemplerity you list on Scherity you list on Scherity you list on Scherity and that lists this proper level for for Jodge Caral 2007 | eral nonbankruptions. 11 U.S.C. edule A/B that yound line on Curry port Cop Schill BE w s_ emption of more and every 3 years and | ou claim as exem rent value of the tion you own by the value from edule A/B 25 000 than \$155,675? after that for cases | pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption 100% of fair market value, up to any applicable statutory limit \$ 1000 000 100% of fair market value, up to any applicable statutory limit \$ 000 100% of fair market value, up to any applicable statutory limit | on. |

Document

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main

Debtor 1

First Name Middle Name Last Name Page 22 of 60 Case number (if known)_

Part 2:

Additional Page

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|---|--------------------------------------|---|------------------------------------|
| | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: 93 Chever Vow Schedule A/B: | \$ <u>200</u> | □ \$ _2 <i>so</i> □ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | \$ | \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | \$ | \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | \$ | \$ \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | \$ | □ \$ □ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | \$ | □ \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | \$ | □ \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | \$ | \$ \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | \$ | \$ \$00% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | \$ | \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | \$ | □ \$ □ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | \$ | \$ 100% of fair market value, up to any applicable statutory limit | |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Page 23 of 60

| | | | Document | i age 2 |
|------------------------|--------------------------|---|----------------------|---------|
| Fill in this in | formation to identify | your case: | | |
| Debtor 1 | # Migge First Nathe | Middle Name | Espitia Last Name | |
| Debtor 2 | | | Last Harrie | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | *************************************** | District of | |
| Case number (If known) | | | (Sta | ite) |

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

| The contract of the contract o | as more than one secured claim, list the creditor separately or has a particular claim, list the other creditors in Part 2. alphabetical order according to the creditor's name. | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecure portion If any |
|--|--|---|---|--|
| | roperty that secures the claim: | \$ | \$ | \$ |
| | | | | |
| City State | of the date you file, the claim is: Check all that apply. Considerated Disputed | 1 | | |
| Who cives the debt? Check one. | Noterre of lien. Check all that apply. | | | |
| Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | An agreement you made (such as mortgage or secured car loan) | | | |
| At least one of the debtors and another | Statutory lien (such as tax lien, mechanic's lien)Judgment lien from a lawsuit | | | |
| Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| | | | | |
| First Merit Buk | Describe the property that secures the claim: | o 4800 | \$ | and recognized the contract the side |
| Erst Merit Back Creditor's Name POBOX Number Street | Describe the property that secures the claim: | 6 48 600 | \$\$ | er (in the second of the secon |
| Creditor's Name POBOX 148 Number Street A KYON Oh 44309-10 | Car Can (BAs of the date you file, the claim is: Check all that apply. Contingent Unliquidated | 6 4800 | \$\$ | |
| Creditor's Name 10 BOX 148 Number Street A KYON ()h 44309-bl City State ZIP Code | Car Wan (BAs of the date you file, the claim is: Check all that apply. — Contingent | 6.4800 | \$\$ | |
| Creditor's Name POBOX 148 Number Street A KYON Oh 44309-10 | Car band Service Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. | 6 48 (20) | \$\$ | |
| Creditor's Name PO BOX 148 Number Street City State ZIP Code W/fo owes the debt? Check one. Debtor 1 only Debtor 2 only | Car ban "BAs of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) | 6 48 (CO) | \$\$ | |
| Creditor's Name POBOX Number Street City State ZIP Code Nylo owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Car Loan Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) | 6 4800 | \$\$ | |
| Creditor's Name PO BOX 148 Number Street City State ZIP Code W/fo owes the debt? Check one. Debtor 1 only Debtor 2 only | Car ban "BAs of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) | 6 4800 | \$\$ | |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Page 24 of 60

Debtor 1

| | Migne | ريسسي | Pocument Psoina |
|---|------------|-------------|-----------------|
| ŧ | First Name | Middle Name | i set Marris |

Case number (if known)___

| Part 1: Additional Page After listing any entries on this by 2.4, and so forth. | page, number them beginning with 2.3, followed | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
|--|--|---|---|-----------------------------------|
| ALCY | Describe the property that secures the claim: | \$ 27.500 | \$ | \$ |
| Creditor's Name PO Box #380402 Number Street | | | | |
| Bloomington Mn 55438 City State ZIP Code 2 | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | J | | |
| Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt | Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number $4 \mu 5$ | | | |
| Creditor's Name | Describe the property that secures the claim: | . | \$\$ | |
| Creditor's rearrie | | | | |
| Number Street | | | | |
| | As of the date you file, the claim is: Check all that apply. Contingent | | | |
| Δ. | Unliquidated | | | |
| City State ZIP Code | ☐ Disputed | | | |
| Who owes the debt? Check one. Debtor 1 only | Nature of lien. Check all that apply. | | | |
| Debtor 2 only | An agreement you made (such as mortgage or secured | | | |
| Debtor 1 and Debtor 2 only | car loan) Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| Creditor's Name | Describe the property that secures the claim: \$ | | \$\$_ | |
| Number Street | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| City State ZIP Code | □ Contingent □ Unliquidated □ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| | An agreement you made (such as mortgage or secured | | | |
| Debtor 2 only | car loan) | | | |
| | Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit | | | |
| | Other (including a right to offset) | | | |
| community debt | | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| Add the dollar value of your entries i | n Column A on this page. Write that number here: S | | | |
| If this is the last page of your form, a Write that number here: | dd the dollar value totais from all pages. | | | encycloth manners |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 25 of 60

005

| : | Document |
|---------|-------------|
| _Misael | Espitia |
| | |

Case number (if known)

| jency is try | ying to collect from you for a debt you | owe to someone else. lis | or a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarly, i |
|--|--|--|--|
| ou nave mo | ore than one creditor for any of the deb or any debts in Part 1, do not fill out or | ts that you listed in Part | 1, list the additional creditors here. If you do not have additional persons |
| | | | On which line in Part 1 did you enter the creditor? |
| Name | | | Last 4 digits of account number |
| Number | Street | | |
| | | | |
| City | Stat | e ZIP Code | |
| | | The second secon | On which line in Part 1 did you enter the creditor? |
| Name | | | Last 4 digits of account number |
| Number | Street | | |
| *************************************** | | | |
| City | State | e ZIP Code | |
| Porton and an extension of the section of the secti | and the second and the second second and the second | http://www.str.hullish.hullish.got.gov/2007/2004/2004/2004/2005/2004/2004/2004/2004 | On which line in Part 1 did you enter the creditor? |
| Name | | | Last 4 digits of account number |
| Number | Street | | <u> </u> |
| | | AWARIAN AWARIA | |
| City | State | ZIP Code | 144444 |
| | the materials and the physical points are great on the commerce of the limited supplying you great and a great an amount of the physical property of the supplying the physical physica | and the second | On which line in Part 1 did you enter the creditor? |
| Name | | | Last 4 digits of account number |
| Number | Street | | |
| | | | |
| City | State | ZIP Code | |
| inger (ng. 1945) ng mga nganggan ng mga n | Adapting at distributed definitions and an animal and an incommend of the attended and attended and attended a | k menterkenstår forstatte år kommer i stepsympteritet til stepsympteritet i stepsympter i skallet ett skallet | On which line in Part 1 did you enter the creditor? |
| Name | | | Last 4 digits of account number |
| Number | Street | | _ |
| ****** | | | NAMA- |
| City | State | ZIP Code | · · · · · · · · · · · · · · · · · · · |
| the encountry of the section of the | arktuursessaan mille maarise miniminin 1990–1990 val seele suurinka maalaja vaataa kaastaassa seele selestaaja | элтэгтэг багаанд эний дэнх хэв нь эний тэмжээ хэнхэг хуудаг байгаан ханаа ганааг | On which line in Part 1 did you enter the creditor? |
| Name | | | Last 4 digits of account number |
| Number | Street | | _ |

City

ZIP Code

| | Case 10-81372 DUCT F | lieu 00/00/10 Entere | 0 00/00/10 10.05.10 | Desc Main |
|----------|---|--|--|-------------------------------|
| | II in this information to identify your case: | | of 60 | |
| | A.B. | | | |
| De | ebtor 1 NISAE | Espitia | | |
| | First Name Middle Name | Lest Name | | |
| | ebtor 2 pouse, if filing) First Name Middle Name | Last Name | | |
| | · | | | |
| Ur | nited States Bankruptcy Court for the: | District of (State) | | (3) |
| Ca | ase number | (0.0.0) | | Check if this is an |
| | (known) | | | amended filing |
| | | | | |
| Of | fficial Form 106E/F | | | |
| • | chedule E/F: Creditors W | ha Massa Ilmaaa | ared Claims | |
| 31 | chedule E/F: Creditors W | no nave Unseci | ured Claims | 12/15 |
| Be: | as complete and accurate as possible. Use Part 1 | for creditors with PRIORITY cl | aims and Part 2 for creditors w | ith NONPRIORITY claims. |
| List | the other party to any executory contracts or un | expired leases that could resul | t in a claim. Also list executory | contracts on <i>Schedule</i> |
| | : Property (Official Form 106A/B) and on Schedu | | | |
| | ditors with partially secured claims that are listed ded, copy the Part you need, fill it out, number th | | | |
| | additional pages, write your name and case nun | | it. Attach the Continuation Fag | e to this page. On the top of |
| | | | | |
| Pai | rt 1: List All of Your PRIORITY Unsecure | d Claims | | |
| 4 | Do any creditors have priority unsecured claims | against you? | | |
| 1 | | against your | | |
| : | L∡ No. Go to Part 2. | | | |
| 16669566 | ☑ Yes. | | | |
| | List all of your priority unsecured claims. If a cre | | | |
| | each claim listed, identify what type of claim it is. If a nonpriority amounts. As much as possible, list the cl | | | |
| | unsecured claims, fill out the Continuation Page of P | | | |
| | (For an explanation of each type of claim, see the in: | structions for this form in the instri | uction booklet.) | |
| | • | | Total clain | n Priority Nonpriority |
| | | | and the second s | amount amount |
| 2.1 | Jana | Last 4 digits of account number | 1 999 \$ 1798 | 7-24 |
| | Priority Creditoris Name | Last 4 digits of account number | 1 | •••• |
| | Buisness Card Services | When was the debt incurred? | | |
| : | Numiñer Street | | • | |
| | PO BOX 23066 | As of the date you file, the claim | is: Check all that apply. | |
| | COLUBUS 6 A 31902-3066 | Contingent | | |
| | City State ZIP Code | Unliquidated | | |
| | Who incurred the debt? Check one. | ☐ Disputed | | |
| | Debtor 1 only | | | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured | ciaim: | |
| | At least one of the debtors and another | Domestic support obligations | | |
| | Check if this claim is for a community debt | Taxes and certain other debts yo | · · · · · · · · · · · · · · · · · · · | |
| | • | Claims for death or personal injuintoxicated | ry while you were | |
| | Is the claim subject to offset? | Other. Specify | | |
| | ☑ Yes | Other. Specify | | |
| 00 | TES | | teriti redicionista in mineria (i de recisio de recisio de recisio de la reconstancia de recisio de | |
| 2.2 | Priority Creditor's Name | Last 4 digits of account number | \$ | \$\$ |
| | Prioray Creditor's Marie | When was the debt incurred? | | |
| | Number Street | | | |
| | | As of the date you file, the claim | is: Check all that apply. | |
| | | Contingent | | |
| | City State ZIP Code | Unliquidated | | |
| | Who incurred the debt? Check one. | Disputed | | |
| | Debtor 1 only | Type of PRIORITY unsecured of | :laim: | |
| | Debtor 2 only | Domestic support obligations | | |
| | Debtor 1 and Debtor 2 only | Taxes and certain other debts yo | u owe the government | |
| | At least one of the debtors and another | Claims for death or personal injur | | |
| | ☐ Check if this claim is for a community debt | intoxicated | y maile you male | |
| | Is the claim subject to offset? | Other. Specify | | |
| | □ No | · · · · · · | | |
| | Q Yes | 100 to 11 to 10 to | | |
| | | | | |

Pärt 1:

Case 16-81372 Doc 15-File 006/06/16 Entered 06/06/16 16:05:16 Desc Main Page 27 of 60

Your PRIORITY Unsecured Claims — Continuation Page

| | em beginning with 2.3, followed by 2.4, and so forth. | Total claim | Priority amount | Nonprior amount |
|--|--|--|--|--------------------|
| Priority Creditor's Name | Last 4 digits of account number | \$ | \$ | \$ |
| Number Street | When was the debt incurred? | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| | ☐ Contingent | | | |
| City State ZIP Code | Unliquidated | | | |
| Who incurred the debt? Check one. | ☐ Disputed | | | |
| Debtor 1 only | Type of PRIORITY unsecured claim: | | | |
| Debtor 2 only | Domestic support obligations | | | |
| Debtor 1 and Debtor 2 only | Taxes and certain other debts you owe the government | | | |
| At least one of the debtors and another | Claims for death or personal injury while you were | | | |
| Check if this claim is for a community debt | intoxicated Other. Specify | | | |
| is the claim subject to offset? | | | | |
| ☐ No ☐ Yes | | | | |
| The contract of the contract o | Last 4 digits of account number | \$ | | |
| Priority Creditor's Name | | Ψ |) | p |
| Number Street | When was the debt incurred? | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| City State ZIP Code | Contingent | | | |
| City State ZiP Code | Unliquidated | | | |
| Who incurred the debt? Check one. | ☐ Disputed | | | |
| Debtor 1 only | Type of PRIORITY unsecured claim: | | | |
| Debtor 2 only | ☐ Domestic support obligations | | | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Taxes and certain other debts you owe the government | | | |
| | Claims for death or personal injury while you were | | | |
| Check if this claim is for a community debt | intoxicated Other. Specify | | | |
| Is the claim subject to offset? | Otter. Opecity | | | |
| □ No | | | | |
| Yes | | | | |
| _ | | فللمعادة والمراجعة والمراجعة والمراجعة والمستراة والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة | ine the time to report was protected as a post of the section of t | |
| Priority Creditor's Name | Last 4 digits of account number\$ | \$_ | \$ | |
| Number Street | When was the debt incurred? | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| City State ZIP Code | Contingent | | | |
| City State ZIP Code | Unliquidated | | | |
| Who incurred the debt? Check one. | ☐ Disputed | | | |
| Debtor 1 only | Type of PRIORITY unsecured claim: | | | |
| Debtor 2 only | ☐ Domestic support obligations | | | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Taxes and certain other debts you owe the government | | | |
| | Claims for death or personal injury while you were | | | |
| ☐ Check if this claim is for a community debt | intoxicated Other. Specify | | | |
| Is the claim subject to offset? | *************************************** | | | |
| ☐ No ☐ Yes | | | | |

Part 2:

List All of Your NONPRIORITY Unsecured Claims

| 3. Do any creditors have nonpriority unsecured claims again: | |
|---|--|
| ☐ No. You have nothing to report in this part. Submit this form ☐ Yes | n to the court with your other schedules. |
| | |
| 4. List all of your nonpriority unsecured claims in the alphabe | etical order of the creditor who holds each claim. If a creditor has more than one |
| nonpriority unsecured claim, list the creditor separately for each | Claim. For each claim listed, identify what type of claim it is. Do not list claims already. |
| included in Fart 1. If more than one creditor holds a particular of | claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured |
| claims fill out the Continuation Page of Part 2. | |
| | Total claim |
| i.1 | |
| Nonpriority Creditor's Name | Last 4 digits of account number |
| The printy ordered a warne | When was the debt incurred? |
| Number Street | THE THE GENT RECUITED: |
| Hallioti Street | |
| City State ZIP Code | As of the date you file, the claim is: Check all that apply. |
| State Zir Code | no of the date you me, the claim is. Check all that apply. |
| 1869 - 7 | Contingent |
| Who incurred the debt? Check one. | Unliquidated |
| Debtor 1 only | ☐ Disputed |
| Debtor 2 only | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: |
| At least one of the debtors and another | ☐ Student loans |
| ☐ Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce |
| | that you did not report as priority claims |
| Is the claim subject to offset? | Debts to pension or profit-sharing plans, and other similar debts |
| □ No | Other. Specify |
| ☐ Yes | |
| | |
| 2 | Last 4 digits of account number \$ |
| Nonpriority Creditor's Name | When was the debt incurred? |
| | |
| Number Street | |
| | As of the date you file, the claim is: Check all that apply. |
| City State ZIP Code | ☐ Contingent |
| Who incurred the debt? Check one. | ☐ Unliquidated |
| Debtor 1 only | ☐ Disputed |
| Debtor 2 only | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: |
| At least one of the debtors and another | ☐ Student loans |
| | Obligations arising out of a separation agreement or divorce |
| Check if this claim is for a community debt | that you did not report as priority claims |
| Is the claim subject to offset? | Debts to pension or profit-sharing plans, and other similar debts |
| □ No | Other. Specify |
| ☐ Yes | |
| | |
| | Last 4 digits of account number |
| Nonpriority Creditor's Name | When was the debt incurred? |
| | Tiren was the dept incurred? |
| Number Street | The second secon |
| | As of the date you file, the claim is: Check all that apply. |
| City State ZIP Code | 10.5 |
| Who incurred the debt? Check one. | Contingent |
| Debtor 1 only | Uniiquidated |
| Debtor 2 only | ☐ Disputed |
| Debtor 1 and Debtor 2 only | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: |
| | ☐ Student loans |
| Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce |
| Is the claim subject to offset? | that you did not report as priority claims |
| No | Debts to pension or profit-sharing plans, and other similar debts |
| Yes | Other. Specify |
| | |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Page 29 of $^{\circ}$ Page 29 of $^{\circ}$ Page 29 of $^{\circ}$

| • | 3 | | r | | c | |
|---|---|---|---|---|---|---|
| н | ě | è | н | н | н | 7 |
| | | | | | | |

Your NONPRIORITY Unsecured Claims — Continuation Page

| | - The Committee of the |
|--|---|
| | Last 4 digits of account number s |
| Nonpriority Creditor's Name | When was the debt incurred? |
| Number Street | As of the date you file, the claim is: Check all that apply. |
| City State ZiP Code | ☐ Contingent |
| Who incurred the debt? Check one. | ☐ Unliquidated |
| Debtor 1 only | ☐ Disputed |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Student loans |
| ☐ Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |
| Is the claim subject to offset? | Debts to pension or profit-sharing plans, and other similar debts |
| No | Other. Specify |
| Yes | |
| | Last 4 digits of account number |
| Nonpriority Creditor's Name | When was the debt incurred? |
| Number Street | As of the date you file, the claim is: Check all that apply. |
| City State ZIP Code | Contingent |
| | Unliquidated |
| Who incurred the debt? Check one. Debtor 1 only | ☐ Disputed |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: |
| Debtor 1 and Debtor 2 only | Student loans |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that |
| Check if this claim is for a community debt | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts |
| s the claim subject to offset? | Other. Specify |
| □ No □ Yes | |
| | Last 4 digits of account number |
| Nonpriority Creditor's Name | When was the debt incurred? |
| Aumber Street | As of the date you file, the claim is: Check all that apply. |
| Sity State ZIP Code | Contingent |
| Who incurred the debt? Check one. | Unliquidated |
| Debtor 1 only | Disputed |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | ☐ Student loans |
| | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |
| Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts |
| s the claim subject to offset? | Other. Specify |
| □ No □ Yes | |

Part 3:

List Others to Be Notified About a Debt That You Already Listed

| | | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
|----------------------------|--|--|--|--|
| Name | | | | • |
| N | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | Part 2: Creditors with Nonpriority Unsecured Claim |
| | | | *************************************** | Last 4 digits of account number |
| City | ettlertlartalistatischischischen and scholarapide opposition of the second scholar state of the second scholar | State State | ZIP Code | |
| Name | | | W-W-1 | On which entry in Part 1 or Part 2 did you list the original creditor? |
| name | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | Part 2: Creditors with Nonpriority Unsecured |
| -MI-IL- | | | | Claims |
| City | | State | ZIP Code | Last 4 digits of account number |
| Name | | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | Part 2: Creditors with Nonpriority Unsecured |
| | | | *************************************** | Claims |
| City | | State | ZIP Code | Last 4 digits of account number |
| Name | | et eritael kheritaati keesemaa kuus eriitati keepergaleg keeping peesemaa | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | Part 2: Creditors with Nonpriority Unsecured |
| | | | | Claims |
| City | TO SAC YORK DON'N A BARBARA A A MARKA WAY DAN BARBARA BARBARA BARBARA BARBARA BARBARA BARBARA BARBARA BARBARA | State | ZIP Code | Last 4 digits of account number |
| Name | | | *** ********************************** | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| City | | State | ZIP Code | Last 4 digits of account number |
| managam sakan-anasama kan- | Aller vierelin te vez esert er nelektoronaren eze espera, un pengula garagar g | engelegischen Sternang Geberatung in Section von Section (1992) der Se | ar al Aribban yan yanaran Ariba giray Mandagai Aribagai ay ang ang ang ang ang ang | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | Part 2: Creditors with Nonpriority Unsecured |
| · | | | | Claims |
| City | Eller Europe de la les Europe de la montre de | State | ZIP Code | Last 4 digits of account number |
| Vame | | | MANA, Miller May Alliky | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Vumber | Street | | ************************************** | Part 2: Creditors with Nonpriority Unsecured |
| | P1.4. | | | Claims |
| itv | | | | Last 4 digits of account number |

Case 16-81372 Doc 1

Filed 06/06/16

Entered 06/06/16 16:05:16

Desc Main

Middle Name

Last Name Document Page 31 of 80 number (# known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | | Total claim |
|-----------------------------|---------------|--|------------|--|
| Total claims | 6a. l | Domestic support obligations | 6a. | \$ |
| from Part 1 | | Taxes and certain other debts you owe the government | 6b. | \$ |
| | | Claims for death or personal injury while you were intoxicated | 6c. | \$ |
| | | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | + \$ |
| | 6e. | Total. Add lines 6a through 6d. | 6e. | \$ |
| | | | | |
| ria (venaka shek kumben | | | | Total claim |
| Total claims | 6f. \$ | Student loans | 6f. | Total claim |
| Total claims from Part 2 | 6g. (| Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6f. 6g. | Total claim ss |
| | 6g. (| Obligations arising out of a separation agreement or divorce that you did not report as priority | | ************************************** |
| | 6g. (66. I | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other | 6g. | \$ |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 32 of 60

| | | | Document | Page 32 of 60 | |
|--------------------------------|----------------------|------------------|----------------------|---------------|------------------------------------|
| Fill in this ir | nformation to ider | itify your case: | | | |
| Debtor | Misae | Middle Name | Espitic Last Name | | |
| Debtor 2 (Spouse if filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for | the: | District of | (State) | |
| Case number (If known) | | | | | Check if this is an amended filing |
| Official F | Form 106G | | | | |
| Sahadı | ulo C. Ev | | | | |

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| N. S | | | | | |
|--|-------------------------------|--|---|--|---|
| | Person o | or company wit | th whom you | have the contract or lease | State what the contract or lease is for |
| 2.1 | | | | in tanan dari perumbahan dari berangkan dari berangkan dari berangkan dari berangkan dari berangkan dari beran Pengan pengan penga | |
| | Name | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | | <u> </u> |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.2 | hehelehhellenlene valender (a | ettimett verkoorde van van dittier van vette van dittier van dittier van dittier van dittier van dittier van d | State | ZIP CODE Negrandidandilassiadanassiadanassiasiasiasiasiasiasiasiasiasiasiasiasi | |
| | Name | | *************************************** | | |
| | | | | | |
| | Number | Street | | | |
| interest property | City | | State | ZIP Code September 1990-1990 Code | |
| 2.3 | b. 1 | | | | |
| | Name | | | | |
| | Number | Street | | | |
| Lecture | City | TOTAL WARRANT TO THE STATE OF T | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| : : : :: ::::::::::::::::::::::::::::: | City | | State | ZIP Code | |
| 2.5 | | | | | |
| ;, | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 33 of 60

| | Docume | ent Page 33 of 60 |
|----------|--|--|
| Debtor 1 | First Name Middle Name Last Name | Case number (# known) |
| | Additional Page if You Have More Contracts | or Leases |
| | or company with whom you have the contract or le | HANNESKEN VILGEN STERREN FOR EN ER EN |
| _ | | |
| Name | | |
| Number | Street | |
| City | State ZIP Code | |
| •— | | |
| Name | | |
| Number | Street | |
| City | State ZIP Code | v 3 cm c Mark Marketine |
| | | |
| Name | | |
| Number | Street | |
| City | | |
| | State ZIP Code | |
| Name | | |
| | | |
| Number | Street | |
| City | State ZIP Code | |
| <u>.</u> | | |
| Name | | |
| Number | Street | |
| City | State ZIP Code | MACANIA ALL ASSESSMENT |
| | | |
| Name | | |
| Number | Street | |
| City | State ZIP Code | |
| | | |
| Name | | |
| Number | Street | |
| City | State ZIP Code | |
| | oddor effethiografia and the common and common the common the common depth of the company of the common the co | |
| Name | | |
| Number | Street | |

State

ZIP Code

City

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main

Document Page 34 of 60

| | | | Document | i age on |
|---------------------------------|-------------------------|----------------|---------------------|----------|
| Fill in this in | formation to ident | ify your case: | | |
| Debtor 1 | Misael First Name | Middle Name | ESPITA Last Name | - |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for th | ne: | District of | tate) |
| Case number (If known) | | | | : |

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| | Do you ha | ve any codebtors? | (If you are filing a joint case, do | not list either spouse | as a codebtor.) | |
|---|--------------------------|--|-------------------------------------|-------------------------|--|---------------------|
| i | ☐ Yes | | | | | |
| | | | | | ry? (Community property states and territories as, Washington, and Wisconsin.) | |
| • | Mo. Go | to line 3. | | | , | |
| | 🔲 Yes. Di | d your spouse, form | er spouse, or legal equivalent li | ve with you at the time | ? | |
| | ☐ No | | | | | |
| | ☐ Yes | s. In which communi | ty state or territory did you live? | | Fill in the name and current address of that person. | |
| | Nar | ne of your spouse, former | spouse, or legal equivalent | | | |
| | Nun | nber Street | | | - | |
| *************************************** | City | rifficative discover day the discolutions of the constitution of t | State | ZIP Code | - | |
| | | | | | or if your spouse is filing with you. List the person | |
| | Schedule i Schedule i | D (Official Form 10 E/F, or Schedule G | | | er. Make sure you have listed the creditor on lule G (Official Form 106G). Use Schedule D, | . |
| | Column 1. | Your codebtor | | | Column 2: The creditor to whom you owe the debt | |
| 3.1 | | | | | Check all schedules that apply: | |
| 3.1 | Name | | | | Schedule D, line | |
| | Name | | | | ☐ Schedule E/F, line | |
| | Number | Street | | | Schedule G, line | |
| | City | | State | ZiP Code | and the same of th | |
| 3.2 | | | | | _ | |
| <u></u> | Name | | | | Schedule D, line | |
| i : | Number | Street | | | Schedule E/F, line | |
| | Number | Street | | | ☐ Schedule G, line | |
| : | City | | State | ZIP Code | | |
| 3.3 | | | | | Schedule D, line | |
| | Name | | | | Schedule E/F, line | |
| | Number | Street | | | Schedule G, line | |
| | Či. | | Chat | 715.4:3: | | TATA NATIONAL PARTY |
| - | City | | State | ZIP Code | | |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 35 of 60 Case number (# known)_____

Debtor 1

| rst Name | Middle Name | Last Name |
|----------|-------------|-----------|

| Column 7: Your codebor Column 7: Your codebor Check all schedules that apply. Check all schedules D, line | | Ad | Iditional Page to List I | More Codebtors | | | |
|--|----|-----------|--|--|--|---------------------------------------|-------------|
| Schedule D, line | (| Column 1: | Your codebtor | | | Column 2: The creditor to whom you ow | re the debt |
| Schedule D, line Schedule E, line Schedule D, | | | | | | Check all schedules that apply: | |
| Number Street Schedule E.F. line Schedule G. line Schedule G. line Schedule G. line Schedule E.F. line Schedule G. lin | 3 | | | | | Schedule D, line | |
| Number Street Schedule G, line Schedule G, line Schedule G, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule D, line Schedu | | Name | | | | • | |
| Schedule D, line Schedule E,F, line Schedule D, line Schedule E,F, line Schedule E, | | | | | | | |
| Schedule D, line | | Numper | Street | | | | |
| Name | | City | | State | ZIP Code | - | |
| Number Street State Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line Schedule D, line Schedule D, line Schedule E/F, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule E/F, line Sch | 3 | | | | | C Schodula D line | |
| Number Street Street Schedule G, line | | Name | | | | | |
| City State ZiP Code | | | | | | | |
| Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line Schedule G, line Schedule G, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule D, li | | Number | Street | | | | |
| Schedule D, line | | City | | State | ZIP Code | | |
| Name | 3 | | and the second s | er den fellen ein eine ein er segen fil det dam det der der der eine ein jen ein 1 der des des defende ein ein | | | |
| Number Street | · | Name | | | | | |
| Number Street Street Street Schedule D, line Schedule E/F, line Schedule G, line Schedule G, line Schedule E/F, line Schedule G, line Schedule G, line Schedule G, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedu | | | | | | | |
| Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line Schedule D, line Schedule E/F, line Schedule G, line Schedule G, line Schedule G, line Schedule E/F, line Schedule G, line Schedule G | | Number | Street | | | Schedule G, line | |
| Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line Schedule D, line Schedule E/F, line Schedule G, line Schedule G, line Schedule G, line Schedule E/F, line Schedule G, line Schedule G | | | | Ctato | 7IP Code | _ | |
| Name | | City | anna a maddada ydanning wa a mar ar a | Side | A CONTRACTOR OF THE SECTION AND A CONTRACTOR OF THE SECTION AN | | |
| Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line Schedule G, line Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line Schedule G, line Schedule G, line Schedule E/F, line Schedule G, line Schedule | 3 | | | | | Schedule D, line | |
| Street Street Street Street Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line Schedule E/F, line Schedule G, line Schedu | | Name | | | | ☐ Schedule E/F, line | |
| Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, | | Number | Street | | | Schedule G, line | |
| Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, | | | | | | | |
| Name | | City | | State | ZIP Code | | , |
| Name | 3 | | | | | _ Schedule D, line | |
| City State ZIP Code | | Name | | | | ☐ Schedule E/F, line | |
| City State ZIP Code | | Number | Street | | | Schedule G, line | |
| Schedule D, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line Schedule G, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line | | Homber | Olivor | | | | |
| Name Schedule E/F, line Schedule G, line Schedule G, line Schedule G, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, lin | | City | | State | ZIP Code | | |
| Name Schedule E/F, line Schedule G, line Schedule G, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, l | 3 | | | | | Schedule D. line | |
| Number Street City State ZIP Code Schedule G, line | | Name | | | | | |
| City State ZIP Code | | | 0 | | | | |
| Schedule D, line Schedule E/F, line Schedule G, line City Street ZIP Code 3. | | Number | Street | | | | |
| Name Schedule E/F, line Schedule G, line Schedule G, line City State ZIP Code | | City | | State | ZIP Code | ···· | |
| Name Schedule E/F, line Schedule G, line Schedule G, line City State ZIP Code | 3 | | | | | Cahadula D lina | |
| Number Street City State ZIP Code 3. | Ш | Name | | | | | |
| Number Street City State ZIP Code 3. | : | | | | | | |
| 3. | 1 | Number | Street | | | | |
| 3. | | City | | State | ZIP Code | | |
| | 3. | | | | | | |
| Namo | : | Name | | | | Schedule D, line | |
| Schedule E/F, line | | | | | | | |
| Number Street Schedule G, line | | Number | Street | | | Schedule G, line | |
| City State ZIP Code | | <u> </u> | | Cioto | 7IP Code | | |

| Fill in this information to identify | VOIII Casa: | | | | | |
|--|--|---|---|----------------------|---|---|
| (| | | 35 15 15 15 15 15 15 15 15 15 15 15 15 15 | | | |
| Debtor 1 M Sac First Name | Middle Name | Espiha Les Name | | | | |
| Debtor 2 (Spouse, if filing) First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: | | District of | | | | |
| Case number | | (State |) | Check if th | nis is: | |
| (If known) | | - | | | ended filing | |
| | | | _ | | element showing post as of the following d | |
| Official Form 106I | | | | MM / DI | D/ YYYY | |
| Schedule I: You | ır İncome | | | | | 12/15 |
| Be as complete and accurate as posupplying correct information. If you figure separated and your spouseparate sheet to this form. On the | ou are married and not fi se is not filing with you top of any additional pa | iling jointly, and yo , do not include inf | our spouse is lormation abo | iving with your spou | ou, include informatio use. If more space is n | n about your spouse. eeded, attach a |
| Fill in your employment information. | | Debtor 1 | | | Debtor 2 or non-fi | ling spouse |
| If you have more than one job, attach a separate page with information about additional employers. | Employment status | Employed Not employ | ed | | ☐ Employed ☐ Not employed | |
| Include part-time, seasonal, or self-employed work. | 0 | Electrica | 3 i/A | | | |
| Occupation may include student or homemaker, if it applies. | Occupation | Adams A | bith Ele | ctric) | Y.Y. | |
| : | Employer's name | Local 15 | 0 188w | Wirem | Δ γΔ | |
| | Employer's address | 31290 A Number Street | J. US H | ighway | Number Street | |
| : | | | | | | |
| | | Libertyi | TIL State ZIP C | 60048 | City | State ZIP Code |
| | How long employed the | ere? almost 20 | Irs | | | |
| Part 2: Give Details About | Monthly Income | | | | | |
| Estimate monthly income as of spouse unless you are separated. | - | · | - | | | |
| If you or your non-filing spouse ha below. If you need more space, at | | | rmation for all | employers fo | r that person on the line | es . |
| | | | For | Debtor 1 | For Debtor 2 or non-filing spouse | |
| List monthly gross wages, sale deductions). If not paid monthly, | | | 2. s.H. | 416- | \$ | |
| 3. Estimate and list monthly over | time pay. | | 3. +\$ | \$ | + \$ | |
| 4. Calculate gross income. Add lin | ne 2 + line 3. | | 4. \$ <u>4,</u> | 416 | \$ | |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Page 37 of 60

| First Name | Middle Name | Last Name |

| | | For Debtor 1 | For Debtor 2 or non-filing spouse | , |
|--|------------------------|---------------------|-----------------------------------|-------------------------|
| Copy line 4 here | → 4. | \$ 4,416e | \$ | |
| List all payroll deductions: | | · | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$ 668 | \$ | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$ | | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$ | \$ | |
| 5d. Required repayments of retirement fund loans | 5d. | \$ | \$ | |
| 5e. Insurance | 5e. | \$ | \$ | |
| 5f. Domestic support obligations | 5f. | \$ <u> </u> | | |
| 5g. Union dues | 5g. | \$ <u>144</u> | \$ | |
| 5h. Other deductions. Specify: | | +\$ | + \$ | |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5 | e +5f + 5g + 5h. 6. | \$ 812 | \$ | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from | line 4. 7. | \$3,604 | . \$ | |
| List all other income regularly received: | | | | |
| 8a. Net income from rental property and from operating a profession, or farm | business, | | | |
| Attach a statement for each property and business showin receipts, ordinary and necessary business expenses, and monthly net income. | | \$Ø | \$ | |
| 8b. Interest and dividends | 8b. | \$ | \$ | |
| 8c. Family support payments that you, a non-filing spouse regularly receive | e, or a dependent | | | |
| Include alimony, spousal support, child support, maintenar settlement, and property settlement. | nce, divorce 8c. | \$ | \$ | |
| 8d. Unemployment compensation | 8d. | \$ | \$ | |
| 8e. Social Security | 8e. | \$ | \$ | |
| 8f. Other government assistance that you regularly receiv Include cash assistance and the value (if known) of any no that you receive, such as food stamps (benefits under the Nutrition Assistance Program) or housing subsidies. Specify: | n-cash assistance | \$ | \$ | |
| 8g. Pension or retirement income | 8g. | • | e. | |
| - | - | | | : |
| 8h. Other monthly income. Specify: | 8h. | +\$ | +\$ | 1 |
| . Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f + | 8g + 8h. 9. | \$ \$ | \$ | |
| Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing | spouse. 10. | \$ 3,604 | \$ | = \$ 3,604 |
| . State all other regular contributions to the expenses that you include contributions from an unmarried partner, members of you friends or relatives. | | | ommates, and other | |
| Do not include any amounts already included in lines 2-10 or an | nounts that are not av | ailable to pay expe | nses listed in Schedule J. | , |
| Specify: | | | 11, | + \$ |
| Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Your Assets and Liabilitie | | | | \$ 3,604 |
| | | | | Combined monthly income |
| 3. Do you expect an increase or decrease within the year afte P No. Yes. Explain: | r you file this form? | | | monthly income |

Debtor 1

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 38 of 60

| Fill in this information to identify | Vour case: | | | |
|---|--|---------------------------------|--|--|
| Debtor 1 Misael | — Espitia | Ohaah Kuli | - t- | |
| First Name | Middle Name Last Name | Check if this | | |
| Debtor 2 (Spouse, if filing) First Name | Middle Name Last Name | An amer | • | notition abouter 19 |
| United States Bankruptcy Court for the: | | expense | ement showing post is as of the following | |
| Case number (If known) | \$\$ | State) MM / DD | | • |
| Official Form 106J | | | | |
| Schedule J: Yo | ur Expenses | | | 12/15 |
| Be as complete and accurate as po | ossible. If two married people are fili ed, attach another sheet to this form | | | |
| Part 1: Describe Your Hou | rsehold | | | |
| 1. Is this a joint case? | | • | | |
| No. Go to line 2. Yes. Does Debtor 2 live in a s | separate household? | | | |
| □ No | | | | |
| Yes. Debtor 2 must fil | e Official Form 106J-2, Expenses for S | eparate Household of Debtor 2. | | |
| 2. Do you have dependents? | □ No | Dependent's relationship to | Dependent's | Does dependent live |
| Do not list Debtor 1 and Debtor 2. | Yes. Fill out this information for each dependent | Debtor 1 or Debtor 2 | age | with you? |
| Do not state the dependents' names. | | Spouse | 42 | Yes |
| | | <u>50n</u> | <u></u> | ☐ No ☐ Yes |
| | | Son | <u>13</u> | No Ves |
| | | daughter | _//_ | ☑ No ☑Yes |
| | | son | _5 | O No |
| | | 300 | 21 mbs | Yes |
| 3. Do your expenses include expenses of people other than yourself and your dependents? | No Yes | | | 可 No 學 yes |
| Part 2: Estimate Your Ongoi | ng Monthly Expenses | | | |
| | bankruptcy filing date unless you a | re using this form as a supplem | ent in a Chapter 13 c | ase to report |
| - | kruptcy is filed. If this is a supplement | | | |
| • • | -cash government assistance if you | | | 74501110111011101 |
| | I it on Schedule I: Your Income (Office | | Your expe | nses |
| The rental or home ownership e any rent for the ground or lot. | expenses for your residence. Include | first mortgage payments and | 4. \$ 6005 | <u>) </u> |
| If not included in line 4: | | | ۔۔ | |
| 4a. Real estate taxes | | | 4a. \$ <u>Ø</u> | |
| 4b. Property, homeowner's, or re | | | 4b. \$ 2 | |
| 4c. Home maintenance, repair, | | | 4c. \$ 35 | |
| 4d. Homeowner's association or | condominium dues | | 4d. \$ € | |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 39 of 60

Debtor 1

Missael Espita

Case number (if known)_

| | | | Your expenses |
|-----|---|------|----------------------|
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5. | \$ |
| 6. | Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a. | \$_300 |
| | 6b. Water, sewer, garbage collection | 6b. | \$ 18 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ 190 |
| | 6d. Other. Specify: | 6d. | s Ø |
| 7. | Food and housekeeping supplies | 7, | \$ 800 |
| 8. | | 8. | s 20 |
| 9. | Clothing, laundry, and dry cleaning | 9. | \$ 75° |
| 10. | | 10. | \$ 50 |
| 11. | | 11. | \$ 75 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. | | *** |
| | Do not include car payments. | 12. | \$_1120 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ <u>Ø</u> |
| 14. | Charitable contributions and religious donations | 14. | \$ <u>50</u> |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a. | \$ \(\mathcal{E} \) |
| | 15b. Health insurance | 15b. | \$ 0 |
| | 15c. Vehicle insurance | 15c. | \$ 100 |
| | 15d. Other insurance. Specify: | 15d. | \$ <u>Ø</u> |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$ |
| 17. | Installment or lease payments: | | , |
| | 17a. Car payments for Vehicle 1 | 17a. | <u>s 561-</u> |
| | 17b. Car payments for Vehicle 2 | 17b. | \$ <i>\$</i> |
| | 17c. Other. Specify: | 17c. | \$ <i>Ø</i> |
| | 17d. Other. Specify: | 17d. | \$ |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | * & |
| 19. | Other payments you make to support others who do not live with you. | | |
| | Specify: | 19. | \$ <u> </u> |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income | 9. | |
| | 20a. Mortgages on other property | 20a. | <u>\$</u> |
| | 20b. Real estate taxes | 20b. | \$ |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$ <u> </u> |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ |
| | 20e. Homeowner's association or condominium dues | 20e. | \$ |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 40 of 60

| Debtor 1 | First Name Middle Name Last Name | ase number (# known) | |
|-------------|---|--|--|
| 21. Other. | Specify: Credit Card | 21. | +\$ 650 |
| 22. Calcul | ate your monthly expenses. | | |
| 22a. A | dd lines 4 through 21. | 22a. | s 4591 |
| 22b. C | ppy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | 22b. | sØ |
| 22c. A | dd line 22a and 22b. The result is your monthly expenses. | 22 c. | \$ 4,591 |
| 23. Calcula | te your monthly net income. | | • • |
| 23a. C | opy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ 3,604 |
| 23b. C | opy your monthly expenses from line 22c above. | 23b. | -s 4,591 |
| | ubtract your monthly expenses from your monthly income. ne result is your monthly net income. | 23c. | -s_987 |
| 4. Do you | expect an increase or decrease in your expenses within the year after you file t | this form? | |
| | nple, do you expect to finish paying for your car loan within the year or do you expect e payment to increase or decrease because of a modification to the terms of your mo | | |
| TYes. | Explain here: | ere engagnisje i Verlages i I sammen men en e | and the state of t |

Entered 06/06/16 16:05:16 Desc Main Case 16-81372 Doc 1 Filed 06/06/16 Page 41 of 60 Document

| Fill in this info | ormation to identify yo | our case: | | , |
|-----------------------------------|-------------------------|-------------|----------------------|--|
| Debtor 1 | MI Sakl | Middle Name | Espitia Last Name | Check if this is: |
| Debtor 2 (Spouse, if filing) F | irst Name | Middle Name | Last Name | An amended filing |
| United States Bar | nkruptcy Court for the: | | _ District of | A supplement showing postpetition chapter 13 |
| Case number (If known) | | | (State) | expenses as of the following date: |

Official Form 106J-2

Schedule J-2: Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor 2's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. If Debtor 1 and

| Part 1: Describe Your Ho | | | | |
|---|--|--|--|---|
| Do you and Debtor 1 maintain s | | | | |
| No. Do not complete this for Yes | om. | | | |
| 2. Do you have dependents? | □ No | | | |
| Do not list Debtor 1 but list all other dependents of Debtor 2 | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 2: | Dependent's age | Does dependent liv with you? |
| regardless of whether listed as a dependent of Debtor 1 on Schedule J. | , | | Additional TEXAS And Applications of the Control of | ☐ No ☐ Yes |
| Do not state the dependents' names. | | | | □ No □ Yes |
| | | | *** | ☐ No ☐ Yes |
| | | | | □ No □ Yes |
| | | | | ☐ No ☐ Yes |
| Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1? | ☐ No ☐ Yes | | | |
| | ng Monthly Expenses | | | |
| | bankruptcy filing date unless you are | | | |
| xpenses as of a date after the bank | kruptcy is filed. | s using this form as a suppleme | ent in a Chapter 13 ca | ase to report |
| nclude expenses paid for with non- uch assistance and have included | -cash government assistance if you it it on Schedule I: Your Income (Offici | know the value of | Your expen | MARC (2012) |
| The rental or home ownership ex any rent for the ground or lot. | kpenses for your residence. Include fi | rst mortgage payments and | С | S C C C C C C C C C C C C C C C C C C C |
| If not included in line 4: | | | 4. Ψ | *************************************** |
| 4a. Real estate taxes | | | | |
| 4b. Property, homeowner's, or re- | nter's insurance | | | |
| | • | | 4b. \$ | |
| 4c. Home maintenance, repair, a | nd upkeep expenses | | 4c. \$ | |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 42 of 60

Debtor 1

Case number (if known)_____

| | | | Your expenses |
|-----|---|------|---------------|
| _ | | - | |
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5. | |
| 6. | Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a. | \$ |
| | 6b. Water, sewer, garbage collection | 6b. | \$ |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ |
| | 6d. Other. Specify: | 6d. | \$ |
| 7. | Food and housekeeping supplies | 7. | \$ |
| 8. | Childcare and children's education costs | 8. | \$ |
| 9. | Clothing, laundry, and dry cleaning | 9. | \$ |
| 10. | Personal care products and services | 10. | \$ |
| 11. | Medical and dental expenses | 11. | \$ |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$ |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ |
| 14. | Charitable contributions and religious donations | 14. | \$ |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a. | \$ |
| | 15b. Health insurance | 15b. | \$ |
| | 15c. Vehicle insurance | 15c. | \$ |
| | 15d. Other insurance. Specify: | 15d. | \$ |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$ |
| 17. | Installment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 | 17a. | \$ |
| | 17b. Car payments for Vehicle 2 | 17b. | \$ |
| | 17c. Other. Specify: | 17c. | \$ |
| | 17d. Other. Specify: | 17d. | \$ |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ |
| 19. | Other payments you make to support others who do not live with you. | | |
| | Specify: | 19. | \$ |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom | e. | |
| | 20a. Mortgages on other property | 20a. | \$ |
| | 20b. Real estate taxes | 20b. | \$ |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$ |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ |
| | 20e. Homeowner's association or condominium dues | 20e. | \$ |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 43 of 60

| De | ebtor 1 | First Name Middle Name Last Name Case number (# known |) | |
|-----|-----------------|---|---------------------------------|-----|
| 21. | Other. S | ecify: | 21. | +\$ |
| 22. | The resul | is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the nses for Debtor 1 and Debtor 2. | 22. | \$ |
| 23. | Line not u | ed on this form. | | |
| 24 | De ver | | | |
| | For examp | e, do you expect to finish paying for your car loan within the year or do you expect your ayment to increase or decrease because of a modification to the terms of your mortgage? | | |
| | ☑ No. ☑ Yes. | Explain here: | general programme of the second | |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 44 of 60 Fill in this information to identify your case: Debtor 1 Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of (State) Case number (If known) ☐ Check if this is an amended filing Official Form 106Dec **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? X No ☐ Yes. Name of person . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Signature of Debtor 2

MM / DD / YYYY

| | | | | together, both are equally responsible t | |
|--------------------------------|---------------------------|-------------|----------------------------|--|-----------------------|
| Statem | ent of Finan | cial Aff | airs for Indiv | iduals Filing for Bank | ruptcy 12/15 |
| Official F | Form 107_ | | | | |
| | | | | | |
| (II KNOWN) | | | | | amended filing |
| Case number | | | (01010) | | ☐ Check if this is an |
| United States | Bankruptcy Court for the: | | District of(State) | | |
| Debtor 2 (Spouse, if filing | First Name | Middle Name | Łast Name | | |
| Debtor 1 | (V) Sae | Middle Name | ESpition Last Name | <u> </u> | |
| Fill in this in | formation to identify yo | our case: | | | |
| | Case 16-81372 | Doc 1 | Filed 06/06/16 Document | Entered 06/06/16 16:05:16 Page 45 of 60 | Desc Main |
| | 0 10 01070 | D 1 | E'I I 00/00/40 | E - 1 1 00/00/40 40 0E 40 | Dana Maia |

information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1 | Give Details About Your Marital State | us and Where You I | Lived Before | | |
|-------------------|--|---|---------------------------------|--|-----------------------------------|
| á | at is your current marital status? Married Not married | | | | |
| | ing the last 3 years, have you lived anywhere on No Yes. List all of the places you lived in the last 3 years. | - | | | |
| : | Debtor 1: | Dates Debtor 1 D lived there | ebtor 2: | | Dates Debtor 2 lived there |
| | 13 S. Lafayette Number Street | From 3/2016 To 4/2016 | Same as Debtor 1 Number Street | | Same as Debtor 1 From To |
| | Milledseville II (1057) City State ZIP Code | *************************************** | City | State ZIP Code | a to the area to the |
| | 14579 Greenland Ave Number Street | From 9/2015 To 3/2016 | Same as Debtor 1 Number Street | | Same as Debtor 1 From To |
| | Orland PK 11 60467 City State ZIP Code | | City | State ZIP Code | |
| and X 1 | hin the last 8 years, did you ever live with a spo I territories include Arizona, California, Idaho, Loui No Yes. Make sure you fill out Schedule H: Your Coc | siana, Nevada, New M | exico, Puerto Rico, Texas | erty state or territory? (Co , Washington, and Wiscor | ommunity property states sin.) |

Part 2: Explain the Sources of Your Income

Document Page 46 of 60 Debtor 1 Case number (if kno 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income Sources of income **Gross income** Check all that apply (before deductions and Check all that apply. (before deductions and exclusions) exclusions) Wages, commissions, From January 1 of current year until ■ Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a business Operating a business Wages, commissions, For last calendar year: Wages, commissions, bonuses, tips (January 1 to December 31, 2015 bonuses, tips Operating a business Operating a business ■ Wages, commissions, For the calendar year before that: Wages, commissions, bonuses, tips bonuses, tips (January 1 to December 31, 2014 Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, For the calendar year before that: (January 1 to December 31,

Case 16-81372

Doc 1

Filed 06/06/16

Entered 06/06/16 16:05:16

Desc Main

Case 16-81372 Doc 1 Filed 06/06/16

Entered 06/06/16 16:05:16 Desc Main Page 47 of 60

Debtor 1

| | | Document |
|----------|--|-----------|
| Misael | ************************************** | Espitia |
| rst Name | Middle Name | Last Name |

Case number (#known)_

Part 3:

List Certain Payments You Made Before You Filed for Bankruptcy

| Are eith | er Debtor 1's or Debtor 2's debts primarily consumer debts? | |
|----------|--|------------------------|
| ☐ No. | Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8 "incurred by an individual primarily for a personal, family, or household purpose." |) as |
| | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? | |
| | □ No. Go to line 7. | |
| | Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | |
| | * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. | |
| X Yes | Debtor 1 or Debtor 2 or both have primarily consumer debts. | |
| <i>(</i> | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? | |
| | ☐ No. Go to line 7. | |
| | Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | |
| | Dates of Total amount paid Amount you still owe payment | Was this payment for |
| | Juni ser Card Services 2/9/16 \$ 317 1/2 \$ 17,596.71 | ☐ Mortgage |
| | P.O. BOX 84030 | ☐ Car |
| | Number Street | Credit card |
| | Yaman and the second se | Loan repayment |
| | | Suppliers or vendors |
| | City State ZIP Code | ☐ Other |
| | | |
| | Ally tuto 2/19/2014 \$ 56/52 \$27,364.24 | ☐ Mortgage |
| | _ | Car |
| | P. O. Box 9001957 | Credit card |
| | Number Street | Loan repayment |
| | | Suppliers or vendors |
| | Coursuille, ky 400 90-1957 | Other |
| | City State ZIF Code | |
| | | |
| | First Merit bank \$ 3400 - \$ 4800, or | ☐ Mortgage |
| | Original a Hange | Car |
| | P.O. Box 148 Akron, DH 44309 0148 | Credit card |
| | | Loan repayment |
| | | ☐ Suppliers or vendors |
| | City State ZIP Code | Other |
| | | |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 48 of 60 Debtor 1 Case number (if known) 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid Insider's Name Number ZIP Code Insider's Name Number Street City State ZIP Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid owe Include creditor's name

Insider's Name

Number Street

Insider's Name

Street

Number

City

City

ZIP Code

ZIP Code

State

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 49 of 60

| Dehtor | 1 | |
|--------|---|--|

| Misar | | Espitia |
|-----------|-------------|-----------|
| irst Name | Middle Name | Last Name |

| Case number | (if known) |
|-------------|------------|
| Case number | (if known) |

| st all such matters, including personal nd contract disputes. | ı ınjury cases, | smail cialms actions, (| divorces, collection suits | , paternity actions, suppo | on custody modification |
|--|-----------------|--|---|---|--|
| No | | | | | |
| Yes. Fill in the details. | Natur | e of the case | Court or agenc | | Status of the case |
| | 110101 | | | Antibility in the second of | 1000 - estatuare estatuarente |
| Case title | | | Court Name | | Pending |
| | | | | | On appeal |
| | | | Number Street | | Concluded |
| Case number | | | | | |
| and principal manner operations are as the second s | | | City | State ZIP Code | and the second second section of the second |
| | | | | | Pending |
| Case title | | | Court Name | | On appeal |
| | | | Number Street | | Concluded |
| O | : | | TABINDE GIRCE | | |
| Case number | | | City | State ZIP Code | *** |
| No. Go to line 11. Yes. Fill in the information below. | | Describe the props | irty | Date . | Value of the property |
| | | Describe the prope | irty | Date | Value of the property \$ |
| | | Describe the prope | irty | Date Transfer of the Control of the | Value of the property |
| Yes. Fill in the information below. | | Describe the prope | | Date | Value of the property |
| Yes. Fill in the information below. Creditor's Name | | Explain what happ | ened repossessed. | Date. | Value of the property |
| Yes. Fill in the information below. Creditor's Name | | Explain what happ Property was Property was | ened s repossessed. s foreclosed. | Date | Value of the property |
| Yes. Fill in the information below. Creditor's Name Number Street | 7ID Code | Explain what happ Property was Property was Property was | ened s repossessed. s foreclosed. s garnished. | | Value of the property \$ |
| Yes. Fill in the information below. Creditor's Name | ZIP Code | Explain what happ Property was Property was Property was | ened e repossessed. foreclosed. gamished. attached, seized, or lev | | |
| Yes. Fill in the information below. Creditor's Name Number Street | ZIP Code | Explain what happ Property was Property was Property was Property was | ened e repossessed. foreclosed. gamished. attached, seized, or lev | vied. | |
| Yes. Fill in the information below. Creditor's Name Number Street | ZIP Code | Explain what happ Property was Property was Property was Property was | ened e repossessed. foreclosed. gamished. attached, seized, or lev | vied. | Value of the property \$ Value of the propert |
| Yes. Fill in the information below. Creditor's Name Number Street City State | ZIP Code | Explain what happ Property was Property was Property was Property was | ened repossessed. roreclosed. rogamished. rattached, seized, or leverty | vied. | |
| Yes. Fill in the information below. Creditor's Name Number Street City State | ZIP Code | Explain what happ Property was Property was Property was Property was Describe the prope | ened s repossessed. s foreclosed. s garnished. s attached, seized, or leverty | vied. | |
| Yes. Fill in the information below. Creditor's Name Number Street City State | ZIP Code | Explain what happ Property was Property was Property was Property was Describe the prope Explain what happ | ened s repossessed. s foreclosed. s garnished. s attached, seized, or leverty ened s repossessed. | vied. | \$ |
| Yes. Fill in the information below. Creditor's Name Number Street City State | ZIP Code | Explain what happ Property was Property was Property was Property was Describe the prope Explain what happ | ened repossessed. repossessed. repossessed. repossessed. repossessed. repossessed. repossessed. | vied. | \$ |

Document Page 50 of 60 Debtor 1 Case number (if known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? X No Yes. Fill in the details. Describe the action the creditor took **Date action** was taken Creditor's Name Number Street City ZIP Code Last 4 digits of account number: XXXX-12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? D No Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Number Street State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave per person the gifts Person to Whom You Gave the Gift Number Street State ZIP Code Person's relationship to you

Case 16-81372

Doc 1

Filed 06/06/16

Entered 06/06/16 16:05:16

| 1 Nisul Es | Case number (# known) | |
|--|--|--|
| | | |
| lithin 2 years before you filed for bankrup | tcy, did you give any gifts or contributions with a total valu | e of more than \$600 to any charity? |
| No. Yes. Fill in the details for each gift or contr | ribution. | |
| Gifts or contributions to charities that total more than \$600 | Describe what you contributed | Date you Value contributed |
| (Be the Church' Charity's Name | All our household items, including dressers, china cabinet, tubles, hookshelf, heds, launmower, compressor, yard tools, books, moines, | "Bavors" 3/19/16 \$ 800 "Be the " church" 3/19/16 \$ 500 |
| Number Street Frankfurt IL | Houseware Tems, Lools | |
| City State ZIP Code | | |
| | | |
| 6: List Certain Losses | | |
| Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | Date of your loss Value of property lost |
| | | \$ |
| | | |
| 7. List Certain Payments or Trans | ey, did you or anyone else acting on your behalf pay or tran | ofer any property to any one you |
| onsulted about seeking bankruptcy or pre | | |
| No | parato, or order doublooming agoriolog for our mood required in y | · · · · · · · · · · · · · · · · · · · |
| Yes. Fill in the details. | - <u>Grante de Cara de C</u> | s <u>Recharge for Cabrains bis not main</u> (1999). |
| December 1981 | Description and value of any property transferred | Date payment or Amount of payme transfer was made |
| Person Who Was Paid | | ¢. |
| Number Street | | 5 |
| | | \$ |
| City State ZIP Code | | |
| Email or website address | | |
| Person Who Made the Payment, if Not You | | |
| $w^{\prime} \circ \phi \circ \phi = 0.000000000000000000000000000000000$ | | ayay yang ayang ang ang ang ang ang ang ang ang ang |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 51 of 60

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main

| | First Name Middle Name Last | portia | Case number (if known) | Mark Mark III | |
|----------------|--|---|--|--|------------------------|
| | First Name Middle Name Last | Name | | | |
| - | | Description and value of any property | transferred | Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | | | No. Control and Co | \$ |
| | Number Street | | | No observations were to take | \$ |
| | City State ZIP Code | | | The state of the s | |
| | Ernail or website address | | | | |
| | Person Who Made the Payment, if Not You | | | A A COUNTY AND | |
| ` ا لسا | es. Fill in the details. | Description and value of any property | transferred | Date payment or transfer was made | Amount of payn |
| | | | | | |
| | Person Who Was Paid | : | | | \$ |
| | Person Who Was Paid Number Street | | | | \$ \$ |
| | Number Street City State ZIP Code | | | anyong other than | \$ |
| Inclu Do n | Number Street City State ZIP Code in 2 years before you filed for bankrup sferred in the ordinary course of your lide both outright transfers and transfers in ot include gifts and transfers that you have | otcy, did you sell, trade, or otherwise business or financial affairs? nade as security (such as the granting | transfer any property to | | |
| Inclu Do n | Number Street City State ZIP Code in 2 years before you filed for bankrup sferred in the ordinary course of your I ide both outright transfers and transfers not include gifts and transfers that you have | otcy, did you sell, trade, or otherwise business or financial affairs? nade as security (such as the granting | transfer any property to | ortgage on your prop | erty). |
| Inclu Do n | Number Street City State ZIP Code in 2 years before you filed for bankrup sferred in the ordinary course of your lide both outright transfers and transfers in ot include gifts and transfers that you have | otcy, did you sell, trade, or otherwise business or financial affairs? made as security (such as the granting we already listed on this statement. Description and value of property | transfer any property to of a security interest or m Describe any property | ortgage on your prop | erty). Date transfe |
| Inclu Do n | Number Street City State ZIP Code in 2 years before you filed for bankrup sferred in the ordinary course of your l ide both outright transfers and transfers in iot include gifts and transfers that you have No (es. Fill in the details. | otcy, did you sell, trade, or otherwise business or financial affairs? made as security (such as the granting we already listed on this statement. Description and value of property | transfer any property to of a security interest or m Describe any property | ortgage on your prop | erty). Date transfe |

City

Number Street

Person's relationship to you ____

ZIP Code

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 53 of 60 Debtor 1 Case number (if known) 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No L Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved. closing or transfer or transferred Name of Financial Institution ☐ Checking Savings Number Street Money market ☐ Brokerage City State ZIP Code Other Checking XXXX-Name of Financial Institution ☐ Savings ■ Money market Number Street ☐ Brokerage Other_ State ZIP Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No 🕰 Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? □ No Yes Name of Financial Institution Name Number Street Number Street City

City

State

ZIP Code

ZIP Code

State

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 54 of 60 Case number (if known) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else has or had access to it? Describe the contents have it? (wife) Household furniture & Tselongings; clothing Name of Storage Facility Number Street majedgeville ZIP Code **Identify Property You Hold or Control for Someone Else**

| 23. Do you hold or control any property that sorthold in trust for someone. No Yes, Fill in the details. | omeone else owns? Include any property you borrowed from, are storing for, | |
|--|--|-------|
| Tes. Fill iff the details. | Where is the property? Describe the property | Value |
| Owner's Name | | \$ |
| Number Street | Number Street | |
| City State ZIP Code | City State ZIP Code | |

For the purpose of Part 10, the following definitions apply:

State

ZIP Code

Give Details About Environmental Information

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

| No Yes. | Fill in the details. | | Environmental law, if you know it | Date of notice |
|---------|----------------------|---------------------|------------------------------------|----------------|
| | | Governmental unit | Cityloiniertal law, ii you know it | Date of house |
| Name | of site | Governmental unit | | |
| Numb | er Street | Number Street | | J |
| | | City State ZIP Code | | |

City

Part 10:

Debtor 1

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 55 of 60

| ***** | Last Name | e number (if known) |
|--|--|--|
| | | |
| Have you notified any governmen | ital unit of any release of hazardous material? | |
| ⊠ No | · · · · · · · · · · · · · · · · · · · | |
| Yes. Fill in the details. | | |
| | Governmental unit Environn | nental law, if you know it Date of notice |
| | | |
| Name of site | Governmental unit | |
| *************************************** | | |
| Number Street | Number Street | |
| | | |
| | City State ZIP Code | |
| City State 2 | ZIP Code | |
| Have you been a party in any judic | cial or administrative proceeding under any environm | ental law? Include settlements and orders |
| ₩ | cial of administrative proceeding under any environm | entai law : moidde settlements and Olders. |
| Yes. Fill in the details. | | |
| | Court or agency Nat | ure of the case Status of the |
| | | case |
| Case title | Management of the second of th | Pending |
| | Court Name | On appeal |
| | Number Street | Concluded |
| | , | |
| | | |
| Case number | City State ZIP Code | |
| | · | |
| art 11: Give Details About | Your Business or Connections to Any Busines | |
| Give Details About | Your Business or Connections to Any Busines r bankruptcy, did you own a business or have any of t | he following connections to any business? |
| Within 4 years before you filed for A sole proprietor or self-er | Your Business or Connections to Any Busines r bankruptcy, did you own a business or have any of t mployed in a trade, profession, or other activity, eithe | he following connections to any business? r full-time or part-time |
| Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab | Your Business or Connections to Any Busines r bankruptcy, did you own a business or have any of t | he following connections to any business? r full-time or part-time |
| Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership | Your Business or Connections to Any Busines r bankruptcy, did you own a business or have any of t mployed in a trade, profession, or other activity, eithe | he following connections to any business? r full-time or part-time |
| Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or man | Your Business or Connections to Any Busines r bankruptcy, did you own a business or have any of t mployed in a trade, profession, or other activity, eithe ility company (LLC) or limited liability partnership (LL | he following connections to any business? r full-time or part-time |
| Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or man | Your Business or Connections to Any Busines r bankruptcy, did you own a business or have any of t mployed in a trade, profession, or other activity, eithe ility company (LLC) or limited liability partnership (LL maging executive of a corporation the voting or equity securities of a corporation | he following connections to any business? r full-time or part-time |
| Art 11: Give Details About No. Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or man An owner of at least 5% of No. None of the above applies | Your Business or Connections to Any Busines r bankruptcy, did you own a business or have any of t imployed in a trade, profession, or other activity, eithe ility company (LLC) or limited liability partnership (LL inaging executive of a corporation the voting or equity securities of a corporation Go to Part 12. | he following connections to any business? r full-time or part-time |
| Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or mar An owner of at least 5% of No. None of the above applies Yes. Check all that apply above | Your Business or Connections to Any Busines r bankruptcy, did you own a business or have any of t imployed in a trade, profession, or other activity, eithe ility company (LLC) or limited liability partnership (LL inaging executive of a corporation if the voting or equity securities of a corporation is. Go to Part 12. It is and fill in the details below for each business. | he following connections to any business? r full-time or part-time |
| Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or mar An owner of at least 5% of No. None of the above applies | Your Business or Connections to Any Busines r bankruptcy, did you own a business or have any of t imployed in a trade, profession, or other activity, eithe ility company (LLC) or limited liability partnership (LL inaging executive of a corporation the voting or equity securities of a corporation s. Go to Part 12. The and fill in the details below for each business. Describe the nature of the business | he following connections to any business? r full-time or part-time P) |
| Give Details About No. Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or mar An owner of at least 5% of No. None of the above applies Yes. Check all that apply above EXPRESS TECHOR | Your Business or Connections to Any Busines r bankruptcy, did you own a business or have any of t imployed in a trade, profession, or other activity, eithe ility company (LLC) or limited liability partnership (LL inaging executive of a corporation if the voting or equity securities of a corporation is. Go to Part 12. It is and fill in the details below for each business. | he following connections to any business? r full-time or part-time P) Employer Identification number Do not include Social Security number or ITIN. |
| Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or man An owner of at least 5% of No. None of the above applies Yes. Check all that apply above EXPRESS TECHTORY Business Name | Your Business or Connections to Any Busines r bankruptcy, did you own a business or have any of to imployed in a trade, profession, or other activity, either illity company (LLC) or limited liability partnership (LL inaging executive of a corporation is the voting or equity securities of a corporation is. Go to Part 12. The end fill in the details below for each business. Describe the nature of the business Occords Occords | Employer Identification number Do not include Social Security number or ITIN. EIN: 3 8-385970 |
| Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or man An owner of at least 5% of No. None of the above applies Yes. Check all that apply above EXPRESS TECHTOBUSINESS Name | Your Business or Connections to Any Busines r bankruptcy, did you own a business or have any of to imployed in a trade, profession, or other activity, either illity company (LLC) or limited liability partnership (LL inaging executive of a corporation is the voting or equity securities of a corporation is. Go to Part 12. YE and fill in the details below for each business. Describe the nature of the business YOUGHS Name of accountant or bookkeeper | he following connections to any business? If full-time or part-time P) Employer Identification number Do not include Social Security number or ITIN. EIN: 3 8-385970 |
| Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or man An owner of at least 5% of No. None of the above applies Yes. Check all that apply above EXPRESS TECHY Business Name Number Street | Your Business or Connections to Any Busines r bankruptcy, did you own a business or have any of to imployed in a trade, profession, or other activity, either illity company (LLC) or limited liability partnership (LL inaging executive of a corporation is the voting or equity securities of a corporation is. Go to Part 12. The end fill in the details below for each business. Describe the nature of the business Occords Occords | he following connections to any business? If full-time or part-time P) Employer Identification number Do not include Social Security number or ITIN. EIN: 3 8-3 5 9 7 0 1 Dates business existed |
| Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or man An owner of at least 5% of No. None of the above applies Yes. Check all that apply above EXPRESS TECHY Business Name Number Street | Your Business or Connections to Any Busines r bankruptcy, did you own a business or have any of to imployed in a trade, profession, or other activity, either illity company (LLC) or limited liability partnership (LL inaging executive of a corporation is the voting or equity securities of a corporation is. Go to Part 12. YE and fill in the details below for each business. Describe the nature of the business YOUGHS Name of accountant or bookkeeper | he following connections to any business? If full-time or part-time P) Employer Identification number Do not include Social Security number or ITIN. EIN: 3 8-385970 |
| Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or mar An owner of at least 5% of No. None of the above applies Yes. Check all that apply above EXPRESS TECHY Business Name 53 West End Number Street (business Caddress West Andress West End City State 2 | r bankruptcy, did you own a business or have any of to mployed in a trade, profession, or other activity, either illity company (LLC) or limited liability partnership (LL maging executive of a corporation of the voting or equity securities of a corporation of the voting of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the | he following connections to any business? If full-time or part-time P) Employer Identification number Do not include Social Security number or ITIN. EIN: 3 8-3 5 9 7 0 1 Dates business existed |
| Give Details About 1 Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or mar An owner of at least 5% of No. None of the above applies Yes. Check all that apply above EXPRESS TECHT Business Name 53 West Entropy Number Street (Ducines address Westward In the State In St | r bankruptcy, did you own a business or have any of to mployed in a trade, profession, or other activity, either illity company (LLC) or limited liability partnership (LL maging executive of a corporation of the voting or equity securities of a corporation of the voting of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the | Employer Identification number Do not include Social Security number or ITIN. EIN: 3 8-385970 Dates business existed From 2015770 2015 |
| Give Details About No. Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or man An owner of at least 5% of No. None of the above applies Yes. Check all that apply above EXPRESS TECHNORMS Name 53 West End Number Street (Duckess address of the State of S | r bankruptcy, did you own a business or have any of to mployed in a trade, profession, or other activity, either illity company (LLC) or limited liability partnership (LL maging executive of a corporation is the voting or equity securities of a corporation is. Go to Part 12. We and fill in the details below for each business. Describe the nature of the business INC. Electrical Name of accountant or bookkeeper Terry Wallace, CP | Employer Identification number Do not include Social Security number or ITIN. EIN: 3 8 3 5 9 7 0 Dates business existed From 2011 7 To 2015 Employer Identification number Do not include Social Security number or ITIN. |
| Give Details About 1 Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or mar An owner of at least 5% of No. None of the above applies Yes. Check all that apply above EXPRESS. TECHY Business Name 53 West Entropy Number Street (Ducines address West Entropy State 2) | r bankruptcy, did you own a business or have any of to mployed in a trade, profession, or other activity, either illity company (LLC) or limited liability partnership (LL maging executive of a corporation is the voting or equity securities of a corporation is. Go to Part 12. We and fill in the details below for each business. Describe the nature of the business INC. Electrical Name of accountant or bookkeeper Terry Wallace, CP | Employer Identification number Do not include Social Security number or iTIN. EIN: 3 8-3 8 5 9 7 0 1 Dates business existed From 2014? To 2015 Employer Identification number |
| Within 4 years before you filed for A sole proprietor or self-er A member of a limited liab A partner in a partnership An officer, director, or man An owner of at least 5% of No. None of the above applies Yes. Check all that apply above EXPRESS TECHNORMS Name 53 West End Number Street (Duckes address of the State of the Street of the | r bankruptcy, did you own a business or have any of temployed in a trade, profession, or other activity, either illity company (LLC) or limited liability partnership (LL maging executive of a corporation is the voting or equity securities of a corporation is. Go to Part 12. The and fill in the details below for each business. Describe the nature of the business INC. Electrical Name of accountant or bookkeeper LCTRIC Name of accountant or bookkeeper LCTRIC Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN. EIN: 3 8-38 5 9 7 0 Dates business existed From 2011 7 To 2015 Employer Identification number Do not include Social Security number or ITIN. |

Case number (if known) **Employer Identification number** Describe the nature of the business Do not include Social Security number or ITIN EIN: 331214 Name of accountant or bookkeeper Dates business existed Home ADDAGES USE Jerry Wallace, CPA From 5-1-2000 2012-17) 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. Date issued Name MM / DD / YYYY Street ZIP Code Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2 Date _ Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? Yes. Name of person_ Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Doc 1

Filed 06/06/16

Document

Entered 06/06/16 16:05:16

Page 56 of 60

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 57 of 60

| Fill ີ່ໃດ້this ໃຕ້ | iformation to identi | fy your case: | |
|--|-------------------------|---------------|----------------------|
| Debtor 1 | Mischel First Name | Middle Name | US pita Lest Name |
| Debtor 2 (Spouse, if filing) |) First Name | Middle Name | Last Name |
| United States & Case number (If known) | Bankruptcy Court for th | e: | District of (State) |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C1 |
|---|--|--|
| Creditor's | ☐ Surrender the property. | ☐ No |
| name: | Retain the property and redeem it. | ☐ Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | Retain the property and redeem it. | ☐ Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | ☐ No |
| name: | Retain the property and redeem it. | ☐ Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |

12/15

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 58 of 60

| ded. You may assume an unexpired personal property lease if the trustee does not assume it Describe your unexpired personal property leases Lessor's name: Description of leased property: | Will the lease be assumed? ☐ No |
|---|---------------------------------|
| Description of leased | |
| • | |
| | Yes |
| Lessor's name: | ☐ No |
| Description of leased property: | ☐ Yes |
| _essor's name: | □ No |
| Description of leased property: | Yes |
| Lessor's name: | □ No |
| Description of leased property: | Yes |
| Lessor's name: | □ No |
| Description of leased property: | Yes |
| Lessor's name: | □ No |
| Description of leased property: | Yes |
| Lessor's name: | □ No |
| Description of leased property: | ☐ Yes |
| nder penalty of perjury, I declare that I have indicated my intention about any property of my | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In Re: | Misgel | Espitia |) | |
|--------|------------|---------|---|----------|
| | | ě. |) | |
| | | |) | Case No. |
| | Debtor (s) | |) | |
| | | |) | Chapter |
| | | |) | |
| | | |) | |

List of Creditors

| Juniper Business (and Sewice P.O. BOX 23066 Columbus, GA 31902-3066 | |
|---|----|
| Ally Auto P.O. BOX 380902 Bloomington, MN 55438-090 | ۵. |
| First Merit Bank P.O.BOX 148 Akron, OH 44309-01- | 8 |
| | |
| | |
| | |

Case 16-81372 Doc 1 Filed 06/06/16 Entered 06/06/16 16:05:16 Desc Main Document Page 60 of 60 Debtor/Joint Debtor's Name: Misael Espitia